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THE HOME FRONT

Jen Lexmond Louise Bazalgette Julia Margo

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Jen Lexmond Louise Bazalgette Julia Margo January 2011

Executive summary

The Home Front provides an up to date understanding of the pressures and influences on parents, and makes recommendations to policy makers for where to go from here in developing parent-focused policy.

There has been a huge shift in the policy focus on parenting in the past decade: parenting is seen as a legitimate source for policy intervention and a big investment into the parenting workforce and early years services has followed. But the success of many of these new projects and services has been called into question and the current climate of cuts and reduced public service spending confounds decisions about what to try next and what services should be prioritised. In addition, a change of government has brought new policy priorities and a new vision for how best to support families.

At times like these, where political and financial concerns loom large, returning to the subjects of the discussion provides clarity. This report has drawn most heavily on in-depth, ethnographic research with families, children and parents in order to understand the reality of parenting in today's society and to draw conclusions about the best way to support parents. The research has been based on polling of parents' attitudes about parenting and observing their daily lives. The perspectives of children have been placed at the centre of our analysis through employing the principles of participation, observation and listening throughout the course of our fieldwork. We have worked to put the insights gained from individual families into the wider social and economic context of British parenting today.

As this report makes clear, major social and economic shifts have led to parenting being seen as increasingly important and have made the job of parenting more difficult. Key findings from each chapter are listed below.

Parenting has become more important in determining life chances

Social mobility has stagnated over the last decade and at the same time the skills required for success have broadened and softened. The most sought after skills today – soft skills like selfregulation, empathy and application – begin to develop in the very earliest years and parents play the primary role in developing them in children. As the wealth gap has grown and opportunities have diminished, parenting has become a greater determinant of children's life chances. Parents' role as the architects of a fairer society adds mounting pressure to an already very difficult job. Understanding how parents learn about parenting and supporting 'good parenting' are key tasks for government.

Learning to be a parent

- Parents learn about parenting primarily through their own parents. There is a clear transmission of parenting attitudes and capabilities between parent and child that starts at a very early age.
- Parents use secondary sources such as friends, broadcast information and professional advice for information and advice about parenting. Government literature on the subject is consulted least of all.
- Parenting advice makes parents feel more confident, not less confident, about their abilities.
- Early intervention is not just an investment in children's outcomes; it is an investment in the next generation of parents.

'Good' parenting

- There are better and worse ways to bring up children and support their healthy behavioural and cognitive development. The key aspects of 'good parenting' are warmth and consistency.
- Although authoritative (also referred to as 'tough love' or 'firm but fair') parenting is less common in families with low income backgrounds, parental warmth is consistently distributed

throughout economic groups. Consistency in setting boundaries and within the home environment is less likely to occur in very low income families, indicating that these families are either struggling to maintain consistency in their home environment and the rules they set or that they place less importance on consistency as important for children.

• Because of the relationship between poor parenting and structural disadvantage, it is imperative for government to find effective ways of intervening and breaking intergenerational cycles of poor parenting.

Parenting has become a more isolated and anxious job

Over the same time that social mobility has reached a plateau, the shape and structure of families have undergone massive changes, as have the communities and networks surrounding parents. The public rate marriage as less important than they did in the past. Cohabitation has become a cultural norm and is now common before couples marry and have children. Heteronormative views of couple relationships have waned and civil partnerships have been embraced. At the same time, parenting has become less of a collective endeavour and there are often warnings about the atomisation of society. Parents in increasingly nuclear families are less likely to rely on the support and advice of neighbours and more likely to go it alone. A pervasive fear of youth in British society has led to a growing rift between children and adults, with communities becoming less child friendly. The effects of these changes have resulted in parenting being a more isolated and anxious job and put more pressure on parents and their relationships with their partners and children.

Relationships at home

• Relationships between parents and children change quickly over time, as children age and as parents tire or change their approach.

- Variability of children's temperaments and behaviour some of which are shaped before birth – have a great influence on how parents deal with and manage their children. These variables often lead to inconsistency in parenting style and for siblings this can lead to conflict and feelings of unfair treatment.
- Children's differential susceptibility to good and bad care can be a huge predictor of their outcomes; more must be done to identify these children.
- Supportive, loving couple relationships provide a great deal of support for parents. However, couple relationships high in conflict can be more detrimental for both parents and children than divorce or separation. Relationship breakdown should therefore be viewed as something to manage, not necessarily to avoid at all costs. Support for couples should be offered before problems arise to prevent breakdown rather than alleviate problems after they start, with particular attention focused at the key transition point of the birth of a first child.

Communities and social networks

- Good parents can battle and overcome negative influences, but communities can also help; in some circumstances they can overcome the effects of negative parenting.
- The most effective community orientated interventions offer flexible, informal support, which can generate feelings of control and confidence for parents. This kind of approach should be more able to reflect the needs of a particular community, which are likely to differ according to a wide range of factors.
- High levels of trust and interaction in communities are associated with positive parenting styles, as well as overcoming other parental concerns about crime and fear of lacking control. There are positive knock on effects for child outcomes.

Changes to working life and division of labour at home have made parental roles more complex to manage

Major shifts in the way that Britain works have resulted in parallel changes to how Britain parents. As the stay at home mum becomes less common and the dual earner household has become both a cultural norm and economic necessity, parenting is much more shared between mothers and fathers. However, sharing parenting roles more evenly has made for more complex dynamics in partner relationships. Lack of time and financial resources in many families add to the pressure as parents adapt and shape their parenting to the realities of their work lives.

Financial resources

- Poverty puts pressure on parents by restricting the types of provisions, services and accommodation that parents can afford. Financial pressure also negatively impacts on parenting style, leading to stress and damaging self-esteem.
- Although benefits and welfare are lifting workless households out of poverty, those in in-work poverty are seeing little change, and the number of those in in-work poverty exceeds that of workless impoverished households.
- Household chaos has a negative effect on parental style and on children's behaviour. Although household chaos is not explicitly linked to socio-economic status, there are clear connections between poor quality or cramped housing and lower income families.
- Household chaos may be a good additional indicator of parents in need of greater support alongside standard indicators like income.

Work

• The number of hours worked and the flexibility of one's schedule and the quality of one's work impact on parenting style and effectiveness. There is no correlation between parenting

skills and educational background, but there is a correlation between parenting and work conditions.

• The changes to working patterns, particularly for mothers, have led to more complex gender roles. Although there is an acceptance of shared parenting as an idea, the reality does not measure up, with the division of labour still inequitable for many couples, and inadequate policies or support services for fathers.

Recommendations

Our recommendations are organised according to five key policy aims:

- · build the parenting skills base
- target parenting support according to need
- apply the early intervention principle beyond the early years
- make shared parenting a reality
- · support social networks and collective efficacy

They embody a political vision for parenting and specific, targeted changes to improve services.

1 Set the standard for reliable parenting information and advice

Given the impact of parenting on child outcomes, it is fair to say that parenting is an issue of public health. Government should reroute funds to support third sector organisations and online parenting forums to deliver information on effective parenting and create engaging and accurate broadcast material. Government's role should be to set out clear guidelines on high quality parenting advice and safeguard the standard of information from third-party sources.

2 Improve recruitment and retention of health visitors

The health visiting population is declining and ageing. Poor and oversubscribed training structures for health visiting and lack of career progression are key barriers to increased recruitment. Hybrid training models that reduce training time and costs should be encouraged where evidence shows that quality and expertise is not affected. A specific career track for health visitors should be established with salary bands and junior and senior roles developed. 'Fast track' courses aimed at university graduates in subjects such as psychology, sociology and biology should also be offered.

3 Broaden the health visitor role to make health visitors a universal frontline parenting support service

Health visitors are currently spread too thin and their training is too narrowly focused on health related aspects of child development. Their role must be broadened so that they are able to fulfill the following roles:

- · light-touch screening of parent and child for attachment and developmental problems
- giving general advice and support to parents, for example, on housing or financial difficulties that may result from having a new child
- advising parents on parenting style and parent-child interaction
- referring parents to early years services like Sure Start, baby groups and nurseries where appropriate

To prepare health visitors for this broadened role in addition to the medical aspects of health visiting, additional training should be provided.

4 Integrate health visiting with local children's and health services We have a universal infrastructure for early years and parenting support through Sure Start children's centres, but too often centres are not aware of vulnerable families in their area who could benefit from their support. Health visitors should register parents for Sure Start on their first visit to a new family, ensuring that all of the child's main carers are registered. When health visitors make referrals for parents who need extra support, they should liaise between the parents and the centre until the new relationship solidifies. Clear data-sharing protocols between health visitors and Sure Start children's centres should be established.

5 Refocus Sure Start according to the principle of progressive universalism

Sure Start should continue to keep services that promote social mixing as well as building social networks that are universal and open to all. More resource-intensive services such as evidencebased parenting programmes should be targeted on the basis of need. To support accurate needs assessment, government should commission the development of a diagnostic screening tool for children and their parents. This would cover post-natal depression, attachment and bonding in the early years, child emotional and behavioural development, and cognitive and linguistic development.

6 Cap health visiting caseloads in disadvantaged areas

Extra training and more integrated working will not be effective unless health visitor caseloads are reduced, particularly in deprived areas. Health visitors need to be able to spend enough time with vulnerable new parents to build a trusting relationship and provide the support they need. More health visitors should be allocated to the most deprived areas.

7 Develop a second tier of screening for primary school children

When children first arrive at primary school, a diagnostic screening tool should be used to assess their emotional and behavioural development and cognitive and linguistic development. In cases where parents have not engaged with early years services, it is likely that some children may have problems that have previously gone unnoticed. This assessment would provide an opportunity to engage parents and identify if there are any problems in the parent–child relationship or in other areas of the parents' lives that the school could provide support with.

8 Ensure that every primary school has a parent liaison officer

The previous government created the expectation that schools should offer support for parents as part of their responsibility for supporting children's broader social and emotional well-being as well as their academic learning. Primary schools should continue to provide a designated member of staff such as a parent support adviser or learning mentor who is responsible for engaging parents, identifying any support needs. To support this role, parent liaison officers should be trained in an appropriate evidence-based parenting programme.

9 Develop a parenting 'booster' class

Government should commission the development of a parenting class aimed at parents when their children first start primary school. This would focus on helping parents to maintain and update good parenting approaches as their children grow up and would provide an important opportunity for the school to establish a relationship with parents early on. Schools could train either their teachers or parent liaison officers to deliver evidencebased programmes, or could commission this service from voluntary and community sector organisations.

10 Reduce number of families in in-work poverty by supporting a living wage

The combined effects of financial and emotional stress that families in in-work poverty experience are hugely detrimental to effective parenting and have a direct, negative effect on child outcomes. Making work pay is an important goal for supporting parents as well as a broader goal for social justice. Demos supports efforts such as the London living wage campaign and Ed Miliband's proposal of providing tax credits to companies who pay their employees a living wage. Demos echoes Deputy Prime Minister Nick Clegg's call to increase income tax thresholds for working families on low and middle incomes.

11 Boost capacity of organisations to offer flexible work

The announcement of a universal right to request flexible work is encouraging but it does not necessarily translate to a shift in the type of person granted flexible working arrangements, and who has the confidence to ask for it. The next step for policy makers is to develop measures that help businesses improve their offer in a cost-effective and productive way. Research should be commissioned to produce evidence on how to tackle the cultural and organisational barriers that may prevent companies being able to offer flexible working to employees without undermining productivity. The recession and subsequent rise in unemployment should be used as an opportunity to experiment with flexible working arrangements, shorter working weeks or working days which will help alleviate financial strains on businesses.

12 Adopt an equal system of parental leave

There are key problems in the current system of parental leave. A system of parental leave that effectively encourages shared parenting should:

- involve elements of 'use it or lose it' leave for mothers and fathers or partners as well as an element of transferable parental leave
- provide a minimum of the two-thirds of earnings rate of pay supported by the European Commission for at least nine months of available leave.

Demos recommends that the government adopts the Icelandic model, which allows extended paid parental leave in a total of nine months in three instalments of three months, with one instalment designated to the mother, one to the father, and one that may be shared between parents.

13 Move fathers' involvement in parenting related public services into the mainstream

Currently, services for fathers are add-ons to a general service aimed at and developed to suit mothers. More care should be taken to represent fathers through language and images in parenting support materials and pamphlets.

When registering new parents for Sure Start, health visitors and Sure Start workers should always ask to register the parent's partner as well. Early years practitioners, including health visitors, should receive training in proactively engaging fathers and other male carers and ensuring that services are 'fatherfriendly'. Renewed strategies for creating a more gender balanced childcare and early years workforce should be developed.

14 Government should not introduce a married tax allowance

Evidence shows that it is the quality of relationships rather than relationship status which has the greater effect on parental confidence and effectiveness, and hence on children's outcomes. There is no evidence of a 'marriage effect', rather marriage is probably a proxy for more successful relationships. The government is right to support stable relationships in so far as they impact on children. However, many married couples do not have children, making this proposal both moralising and inefficient, as it draws resources away from some of the most atrisk families. Tax allowances, if used to support families, should be aimed at families with children.

15 Improve relationship support by taking advantage of key transition points

The biggest transition point for couples is the birth of their first child. It is the moment at which relationships are most likely to start having difficulties, and the following few years are when most couples suffer relationship breakdown. Intervening before this point to help couples cope with the changes to their relationship is key to creating more stable families and keeping existing stable families on track. Antenatal classes should focus not just on mothers preparing for birth but also on preparing couples for relationship difficulties and sharing information on relationship maintenance strategies and sources of advice and help. Health visitors should also provide advice and information to new parents on relationship support during their first home visit with new parents.

16 Keep Sure Start open to all

As mentioned in the policy aim 'Target parenting support according to need', core Sure Start services like breastfeeding cafés and 'Stay and Play', which support parents to socialise and build informal social networks, should remain universally accessible. Peer mentoring schemes bringing together older and younger parents, or parents and grandparents, should be encouraged, as should volunteering schemes that support parents to get involved in their local community and build their employability skills.

17 Demos supports the coalition's plans to train community organisers and help set up new neighbourhood groups

The coalition government plans to fund community organisers in deprived areas and they could provide the focal point needed to encourage parents to establish new social networks and get involved in local projects. Local community venues should be made available to support groups to meet in the evenings. Looser, more informal initiatives of this kind will complement the provision of structured evidence-based programmes that are based at a school and support parents to build their local support networks and develop effective parenting styles.

Section 1 Parents matter

1 The state of parenting

The received wisdom about the quality of parenting is that it has declined with modernity and that mums and dads are less able to raise their children effectively than they once were. Opinion polls reveal public perceptions of a decline in standards of youth behaviour linked to poorer quality parenting.¹ From tabloid headlines to broadsheet hand-wringing, the emerging narrative paints parents as part of the *problem* with young people. They are selfish, feckless and ill-disciplined – much like the children they raise, who terrorise communities and fail at school. They cannot be trusted to educate their offspring or to equip them with a moral code.

Are British parents failing?

In the past, we are told, parents knew how to control their children. They took responsibility for their children's behaviour, set boundaries and rules, and brought them up to respect adults and to obey moral and legal codes. Mothers and fathers used to support teachers in disciplining their children; now they complain. They once were embarrassed if another adult had to intervene because their child was misbehaving, now they are likely to call the police or accuse their concerned neighbour of assault (or worse).² In short, there is a strong feeling that parenting is in crisis, that mums and dads are not fulfilling their duty to their children and to society, and that we are all suffering as a consequence.

There is some (weak) evidence that suggests parents today are less disciplinarian than in the past, though it is important not to confuse discipline with effective parenting. Anderson et al examined parents' views on their relationship with their children, among other things.³ A variety of research methods was used, including a survey of 692 parents. The results indicated that 72 per cent of parents perceived themselves to be less strict than their own parents. Parents' perceptions of their relationship with their children suggested that 'parents and children seem to have entered a more equal relationship' than in the past.⁴

Of course, these kinds of moral panic are nothing new. The young are often blamed for society's problems and accused of lacking the moral backbone of their forebears – by implication this means that parents are often accused of failing.⁵ What is different this time is not, really, the concern itself. Hoodies may scare their elderly neighbours by virtue of their existence but Teddy boys were hardly a welcome presence on street corners either. The difference between today's moral panic and those of the past is that disapproval of 'poor' parenting is now explicit and encoded in policy.

Whereas there was previously an emphasis on condemning the behaviour of the child - while privately accepting that poor parenting might be the cause - there is now a new willingness to intervene early and to assign blame and corrective interventions to the adult. David Cameron and the Minister for Universities and Skills David Willetts have placed great emphasis on the role of parents, parental responsibility and the impact of quality parenting. This rhetoric has been developed and extended from the Labour government, which converted belief into policy through tools such as parenting orders which place a legal responsibility on parents to resolve issues such as truanting – and has been incorporated into the antisocial behaviour framework. It is no longer enough to disapprove of poor parenting, the state now seeks to act in order to force improvement and replace social pressure with legal requirements.

Are parents' expectations increasing?

But this debate does not confine itself to policy wonks and legislators. Parents expect more of themselves, and of their children, than ever before. To use two examples, between 1986 and 2006, the proportion of parents expecting their children to be polite increased from 75 per cent to 87 per cent. Equally, today, 95 per cent of parents expect their children to do their homework, up from 90 per cent in 1986.6 More serious evidence for this trend is the preponderance of parents who complain and worry about their child's behaviour. In 1986 only one parent in 20 (5.3 per cent) reported that their child destroys things; by 2006, just under one parent in ten (9.7 per cent) highlighted this problem. There has also been an increase in the number of parents reporting that their children steal. The number of parents reporting that their children commit theft has increased by 68 per cent from one in 12 (8.4 per cent) in 1986 to one in seven (14.1 per cent) in 2006. This trend is also evident for the number of children who lie. The number of parents reporting that their children lie has increased by 26 per cent from just under one in six (17.9 per cent) in 1986 to just under one in four (22.5 per cent) in 2006.7 Is this simply parental anxiety honed by excessive media and political focus?

Is youth behaviour becoming more problematic?

Looking at young people born in 2000, there are significant concerns about the rate of conduct disorders (a measure of antisocial behaviour) that cannot be explained solely by changing attitudes. The Millennium Cohort Study (MCS) used a wellestablished measure of social and behavioural competencies, the Strengths and Difficulties Questionnaire (SDQ), to determine the current behavioural issues of children. It found that 10 per cent of children had abnormal scores relating to conduct problems, while another 12 per cent were borderline. Stephen Scott, Professor of Child Health and Behaviour at King's College London, conducted unpublished research for the Home Office on anti-social behaviour in 2002. His research suggested that around 15 per cent of five-year-olds now display troublesome behaviour that might make it difficult to learn at school. These children show 'oppositional and defiant behaviour', are blamed by their parents and generally disliked by their siblings.

Scott estimates this percentage drops throughout primary school and the first few years of secondary school leaving about

6 per cent of all children displaying long-term signs of disengagement, including offending, drug abuse and being not in education, employment or training (NEET).

For adolescents, the trend over time has fitted the pattern of worsening youth behaviour, with the prevalence of conduct problems in 15-year-olds more than doubling from 6.8 per cent in 1974 to 14.9 per cent in 1999, and being highest for boys, with 16.9 per cent of 15-year-olds having conduct problems in 1999.⁸ In a study from 1995, about 20 per cent of children aged 8–11 (173,000 children) displayed some form of inappropriately aggressive behaviour, known formally as conduct disorder. Boys were nearly twice as likely as girls to fall into this category: 26 per cent versus 13 per cent.⁹

However, measuring conduct disorder among children is complicated by the lack of benchmark crime data and by the fact that parents may not be fully aware of their child's conduct or may be unwilling to admit their child's problem behaviour to interviewers. Furthermore, there is no generally accepted and consistent definition of conduct disorder, although most experts agree that it is characterised by either physical or indirect aggression against persons or property, or a severe violation of societal norms. There is certainly an unclear delineation between children and young people who may be just a bit difficult and those with full-blown disorders.

Some accuse government of responding to an empty panic that is built on typical small-c conservatism. Intergenerational tensions and fear of youth may be a problem based in perceptions as opposed to reality, but is predicated on a real breakdown of trust and communication in communities. This particular moral panic is not without good cause. It is built on people's experience of a changed parenting environment – and it is a response to very real social trends.

The changing context of parenting

Three main social trends have recalibrated the parenting environment:

- *A stalling of social mobility* as social mobility has reached a plateau, parenting has become a greater determinant of children's life chances.
- *An atomised society* as society has become more individualistic, parents may be more isolated and anxious about raising children.
- A difficult balance of work and care as the division of labour has changed at work and at home, parents' roles have become more complex and harder to manage.

These trends are explored in detail below.

A stalling of social mobility

The stagnation in social mobility over the last decade is well discussed. Socio-economic progression and advancement have stalled - despite active attempts under New Labour to reenergise social mobility. This stagnation has led to fiercer competition for advancement at the same time as the skills required for success have broadened and become softer.¹⁰ To succeed in the service, managerial or professional sectors requires more than academic brilliance alone. Young people are expected to possess a high degree of social competence, self-motivation and self-discipline if they are to succeed in the modern workforce. There is extensive evidence that these traits are predominantly determined by parenting style - your mother and father are the greatest influence on your soft skills and those soft skills are a key factor in determining your ability to succeed. Demos' landmark research in the report Building Character in 2010 showed that parenting style can define the development of a child's 'character capabilities'; as we discuss within the report children raised by 'authoritative parents' were twice as likely to develop strong character capabilities than those whose parents were disengaged.11

Politicians of the left and right agree on the importance of social mobility and 'equality of opportunity'. Labour and Conservatives may disagree about the mechanics of delivering a more socially mobile and fluid society; for example, the debate over 'free schools' shows the divergence in their ideas for achieving social mobility. But there is very real common ground in the shared assumption that people ought to be able to improve their lot according to their talents and their hard work rather than who their parents were. It is, therefore, regrettable and confusing to see that social mobility in the UK has been declining for around 40 years despite attempts by policy makers of all parties to reverse the trend.

The role of parents in social mobility

Levels of intergenerational mobility – measured by children doing better economically and academically than their parents did – rose year-on-year in the aftermath of the second world war until they reached a plateau in the 1970s. A study that analysed birth cohorts from 1900 to 1960 found that the importance of family background in getting a better job declined until the 1970s but since that time has remained relatively constant.¹² This means that children are no more likely to surpass the achievements of their parents in 2010 than they were in 1970.

By breaking these findings down, and selecting only relative income as our measure of intergenerational mobility, we can see again that stagnation is the reality. Parental income is a far more important determinant of the adult income of people born in 1970 than it was for those born in 1958.¹³ This trend is continuing, entrenching a stark reality that your parents' status and wealth dictate what you will achieve and earn over the course of your adult life. Stacked against international comparators and peer societies, it is clear that social immobility in the UK is significant. Of comparable countries only the USA is consistently less mobile than us.

This trend has been compounded by a socio-economic context which has made it considerably harder for poorer parents to provide the same opportunities for their children as more affluent families. Over the past couple of generations material deprivation has been an increasingly strong predictor of child development deficit. This means that it is not simply external influences, such as schools, that compound social immobility. Evidence presented in *Freedom's Orphans*¹⁴ and *Building Character*¹⁵ suggests that the impact of material deprivation is related to the role of parents in the development of core life skills, known as 'character capabilities'.¹⁶ Although the development of character capabilities among children born in 1958 was not related to income, it was strongly associated with income among those born in 1970.¹⁷ This tells us that, over time, parents who are materially deprived have been relatively less and less able to develop the character traits required for success in their children.

Resource inequality and parenting

Income inequality rose dramatically over the 1980s, reaching a peak in the early 1990s after which time changes have been less severe. The Gini coefficient has been rising since 2003/04 and is currently at its highest level since records began.¹⁸ The Gini coefficient may be imperfect, but it provides us with a means to summarise trends in overall income inequality.

Although income is a useful way to measure inequality, wealth inequality is arguably the most efficient way of capturing disparities in financial resources. During the period from 1930 to 1970, wealth inequality decreased in the UK. Yet since the late 1970s, this trend has been reversed. Wealth inequality has deepened, despite this being a period of unprecedented wealth creation. In 1999 the richest 10 per cent of the population owned 54 per cent of the nation's marketable wealth. The latest official government figures make for even graver reading: in 2003, the richest 1 per cent of the population owned 21 per cent of the nation's wealth. The poorest half owned just 7 per cent and nearly a quarter of the population's personal wealth was less than \pounds 5,000, with 11 per cent of the population owning assets of less than \pounds 500. This net worth, once income has been discounted, comes to less than the cost of a council tax bill.¹⁹

We can see that wider social trends of income and wealth inequality have impacted on parenting and have stalled social mobility. There is a greater disparity between rich and poor families today than several decades ago. Obviously, this means that poor families have comparatively less spending power but does it also mean that the gap between their parenting and the parenting of their wealthier peers has grown?

Income and parenting style

Demos' research suggests that although the ability to love one's child and provide a caring, warm parenting style is unrelated to one's economic status, the ability to set and enforce rules is related to social class, and we review this original analysis in chapter 3.

Poverty is one of the most powerful causes of instability and chaos in the home. There is extensive evidence that financial stress undermines parenting and contributes to a more disordered and anxious parenting style. It is very likely that the strain of parenting under financial stress and insecurity makes it more difficult for parents from low income backgrounds to display the consistent approach to discipline and the boundarysetting qualities which are vital to instilling confidence in children. Other research, reviewed in chapter 6, has also indicated that worsening financial circumstances significantly reduce the quality of parenting.²⁰

This area of policy is simple to understand but it is terrifically difficult to resolve. It is increasingly clear that wealth and income inequality do impact on child development, prospects and social mobility, which makes it increasingly difficult for a child to break out of the circumstances into which they were born. This presents a very real challenge for politicians and policy makers – the vast majority of whom profess to aspire to a more socially mobile society.

An atomised society

During the same period in which social mobility has remained stubbornly fixed, changes to family set ups and social networks means that parenting has become a more isolated and anxious job. Parents are less able to fall back on strong family or community ties in times of difficulty in today's society.

Fluid families

The shape and structure of families have changed dramatically in the past few decades. The percentage of UK households that are single parents with dependent children has more than doubled from 3 per cent in 1971 to 7 per cent in 2008.²¹

While the divorce rate is higher now than in the past, it is falling. The divorce rate fell to 11.2 divorcing people per 1,000 married population in 2008. This compares to the 2007 figure of 11.8, a fall of 5.1 per cent. Additionally, the rate of divorce is at its lowest level since 1979 when it was also 11.2.²²

According to the Office for National Statistics, around 2.2 million unmarried couples in the UK are cohabiting. Over recent years there has been a steep rise in the number of couples living together outside marriage: of those born between 1966 and 1970, 18 per cent were cohabiting between the ages of 25 and 29, of those born between 1971 and 1975, 26 per cent were cohabiting at the same age.²³

Whether as a trial run, a prelude to marriage, or an alternative to it, cohabitation is now an expected part of forming relationships and has contributed to some profound changes in family formation over the last decades in the UK. Increasingly, children are being born to cohabiting couples. In 2008 nearly half (45 per cent) of births in England and Wales took place outside marriage compared with 8 per cent in 1971.²⁴

This trend is not confined to the UK. Over the last decades, patterns in partnership formation and living arrangements have changed significantly in most countries of the Organisation for Economic Co-operation and Development (OECD). In general, marriage rates have declined and increasingly cohabitation is used as a stepping stone for marriage or as a stable alternative to it.²⁵

Across the OECD almost 57 per cent of individuals aged 20 and older live in a couple household. Most of them are married, but there is also a substantial proportion (larger than 10 per cent) of cohabiting couples in Denmark, Estonia, Finland, France, Luxembourg and Norway. In all countries, cohabitation is more common among the youngest adults aged from 20 to 34 years.²⁶

There have been advantages to the new individualism of modern Britain. Wider social liberalism has meant greater

acceptance for alternative family models such as gay adoption and civil partnerships, and greater freedom for individuals, couples and families to pursue their version of the good life. Lowering financial and legal barriers to divorce, for example, has massively reduced levels of marital unhappiness and violence towards women and children.

Nevertheless, fears about family breakdown and a collective failure to establish and maintain stable relationships are rife and have led to claims that couple relationships today are weaker than in the past. The evidence on whether this is undermining couple relationships is much less convincing, as is explored in chapter 4.

Disparate community networks

There is some evidence that Britons feel a 'pulling away' of collective responsibility. For instance, between 1984 and 1996, Britons became much more likely to say that most people in their local area tend to 'go their own way' rather than 'help each other'. In the last decade this trend has begun tentatively to reverse, but the latest findings are that only 39 per cent of people thought that people in their local area helped each other out.²⁷

Increased geographic mobility, combined with the trend towards smaller family structures and less extended family involvement in child rearing, has contributed to more isolated families.²⁸ This means that parents are less likely to be able to rely on interventions and support from their wider family or community - in fact, analysis shows that many parents are less keen to accept help and advice even when they are offered them.²⁹ Parents prefer to 'go it alone', so there are more disparities, differences and discrepancies in how they choose to rear their children; this leads to further inequalities of parenting style. However, the trend is not all one way, for example, the rise of online social networking has led to a new era of online support forums and parenting sites. One such site, iMama, offers content solely from parents and site users themselves, with no 'expert' intervention. The now famous Mumsnet has hosted online discussion forums for parents for almost a decade.³⁰

This problem has been compounded by changes in society's attitudes to children and their relationships with adults more generally. In 2005 more than 1.5 million Britons had thought about moving away from their local area because of young people hanging around and 1.7 million avoided going out after dark as a direct result.³¹ We tend to have a very antiinterventionist approach to other people's children. An international survey in 2006 found that Britons were less likely than citizens of most other European countries to intervene if they saw a young person misbehaving or committing anti-social or violent behaviour. For example, 65 per cent of Germans, 52 per cent of Spanish and 50 per cent of Italians would be willing to intervene, compared with just 34 per cent of Britons.³² In addition, there is strong support (75 per cent) for legally enforceable evening curfews on teenagers.³³

The debate about Criminal Records Bureau (CRB) checks and the extremity of measures taken to safeguard children serves as an example of our increasing anxiety about adult interaction with children.³⁴ It is increasingly considered irresponsible for parents to encourage adult involvement with their children outside the family unit, leading to a strong sense that raising children should be undertaken in the relative safety of the nuclear family to minimise the 'threat' posed by other grown-ups.

This paranoia about children's safety extends beyond the home to modern Britain's attitudes to open space: 57 per cent of the public think that children are more at risk from paedophiles than they used to be and four out of five adults believe that life for children in Britain is more dangerous than it used to be.³⁵ A fear of crime – ranging from the threat of paedophilia to a concern about the crimes we fear our children may themselves commit – has led to far more intense supervision of children in public spaces than has been the case in the past. A landmark study by Gardner recently reported that compared with previous generations, today's parents are more likely to know where their children are and what they're doing.³⁶ In 2006 only one adolescent in seven (14.6 per cent) reported that their parent does not ask where they are going, compared with just over one adolescent in five (21.5 per cent) in 1986. Now, two-thirds (65.6 per cent) of parents ask what specifically their children are going to do, compared with under half (47.4 per cent) asking this in 1986. Nowadays, less than one parent in four (23.2 per cent) does not ask who their child is going out with, compared with one in three (32.9 per cent) in 1986.

Parents are increasingly censured for allowing their children to play in public spaces, or to socialise with their friends, without being watched.³⁷ The recent uproar about parents allowing their children to cycle, unsupervised, to school was characterised by a sense – from the school, social services and some commentators – that there was something inherently negligent about permitting children to leave one's parental sight.³⁸

In *Seen and Heard*³⁹ Demos demonstrated that public space can offer something of a barometer of the state of social relations, and particularly the quality of interactions between adults and children. The public realm is one of the key arenas for children and young people to play, and interact with peers and with older generations. The freedom to play independently is central to a child's healthy development, but poor quality public space, the dominance of cars, the rise of commercial or privately owned spaces, and the pressures of development on our built environment have diminished opportunities for children to explore their communities freely. Fears for the safety of children and parental anxieties have fuelled this withdrawal from public space. Although 71 per cent of adults played outside in their street during their childhood only 21 per cent of children do so today.⁴⁰

These trends towards atomisation and fear of other adults have had a profound effect on parents. They are expected to be involved more actively in more aspects of their children's lives with less support than ever before. At the same time, even as extended family and community involvement have become less available and less attractive to many parents, expectations of what mums and dads should be doing with and for their children have increased. This amounts to a ratcheting up of pressure on Britain's parents at precisely the same time as the safety net of community has been pulled from beneath their feet. The decline in community and family participation in parenting and the degradation of collectivism has made life tough for parents – especially those who cannot afford to replace lost networks with artificial ones through childcare or domestic help.

The difficult balance of work and care

Finally, changes in the way that Britain works have brought parallel changes in how Britain parents. With more women – and more mothers – now in employment than ever before, parenting is much more shared between mothers and fathers than it was in the past. The old cliché of mum as carer and dad as breadwinner and disciplinarian may never have been wholly accurate but it did depict the shared, common experience of growing up. It is no longer helpful. The sharing of parenting roles more evenly has resulted in more complex dynamics within British families with roles less clearly defined and the 'norm' being harder to establish as families adapt and shape their parenting to the realities of their working lives.

Since the 1950s there has been a large increase in female employment, a trend which has been particularly pronounced for mothers. The number of mothers who work has more than tripled from one mother in six in 1951 to four in six by 2008.⁴¹

Today, in the UK, the stay-at-home mum is less and less common – mothers are more likely to work than not work.⁴² Mothers in a couple are more likely to favour part-time work (41 per cent) over full-time work (31 per cent). This pattern is not the same for lone mothers who are just as likely to work full time (28 per cent) as they are part time (27 per cent). In recent years there has been a considerable increase in the number of hours worked by mothers. In 2008 mothers who were married or cohabiting were 24 per cent more likely to work full time than in 1996, with one in three (31 per cent) working full time, compared with one in four (25 per cent) previously.

There is a strong gender difference in perceptions of flexible working. Fewer men than women request to work flexibly, fewer have their requests accepted, and men are less successful than women when they take their cases to tribunals.⁴³ Just 10 per cent of women (235,000) have their requests rejected but 14 per cent of requests made by men (177,000) are rejected. Male claimants counted for 27 per cent of flexible working tribunal claims but accounted for 45 per cent of cases that were not accepted.⁴⁴

The government has announced plans to explore extending the right to request flexible working to all working age adults and overcome barriers for employers to provide such arrangements. Meanwhile, Nick Clegg has launched the Children and Families Taskforce, which is exploring how best to facilitate flexible working for parents.⁴⁵ It remains to be seen whether these well-intentioned approaches will impact on the ability to balance work with childrearing; the right to request flexible working hours thus far has not produced the hoped-for culture change in work–life balance and employers are not always keen to facilitate the need for more flexible jobs.

Shared parenting as a way of distributing parental responsibilities more equally is an ideal that must be strived for. Not only does equally shared parenting represent significant progress for gender equality, it also delivers benefits for parental well-being and serves to strengthen the bonds between father and child.

Political responses

The trends examined above are the real explanation for the more complex and difficult parenting environment today. Our cultural fixation with parenting has found its way into political narratives that do not take account of these wider trends. Labour's approach to parenting intervention introduced the concept of problem or dysfunctional families and a child-centric focus on dealing with anti-social behaviour.⁴⁶ The left's discomfort with discussing adult relationships – and its fear of appearing judgemental – arguably led to the Labour government's reticence in talking explicitly about the role that relationship stability plays in mediating child outcomes, rather this has been the focus of the right, traditionally less concerned about the accusation of judgementalism. The pre-election pledge by the

Conservative party to introduce some form of tax rebate for married couples was an explicit attempt to remodel government's approach to family policy in favour of two parent, married structures. The emphasis on marriage, however, misses the point as widely as Labour's deliberate disengagement from the question of structure altogether. It is not marriage, per se, that makes parenting 'good', but the quality and stability of couple relationships. What is needed from government is a set of interventions that genuinely engage with parenting rather than obsessively focusing on the relationship status of parents and partners.

These real social changes have driven both the moral panic about parenting that we are witnessing and the political responses that drive policy. This report disentangles the real factors that shape parental effectiveness, which stem from the social and economic changes outlined in this chapter, from those political and popular perceptions. It builds on extensive ethnographic and qualitative research, as well as new analysis of social trends, to ask how parents can be better supported through public policy interventions. It is right that government responds to the increased importance of parenting in our society and that it uses policy to reinforce and develop good parenting. But in order to do this government must understand what good parenting is, what causes it to happen and what barriers exist to prevent well-meaning parents from succeeding. Using the experiences of real families we can develop that understanding and put it to use in developing a governmental response that is effective and empowering for parents and, ultimately, succeeds in raising children well. Such a policy agenda would be good for parents, helping them to be confident and skilled, good for children, helping them to succeed, and good for society, helping us all.

2 Methodology and 'meeting the parents'

The primary aim of *The Home Front* is to bring the perspectives of parents, children and families to the forefront of the policy debate about how to best support parents. To this end, a mixed research methodology was employed that combined representative attitudinal polling of parents with detailed, micro-level ethnographic observations of family life and parent–child interaction. This primary research has been supplemented with secondary longitudinal data analysis of the British and Millennium Cohort Studies, a literature and policy review, and a series of case studies with parenting services.

In this chapter, we will discuss the five elements of the research:

- · literature and policy review
- \cdot ethnography
- \cdot polling
- longitudinal analysis
- · case studies with services

Literature and policy review

The research findings are discussed in the context of the leading academic literature and the current family policy and support services landscape. The literature review covered academic literature, policy documents and research from third sector and charity organisations, and identified key influences and pressures on parents as well as policy priorities of both the coalition and recent Labour governments. Areas covered included:

- · child-led and child-centred qualitative research
- · ethnographic family studies

- · theories of parental well-being
- comparative analysis of family policy across selected European countries
- · theories of children's development
- · human ecology theory
- relationship support strategies
- social and economic trends analysis including social mobility, changing family forms, changes to community organisation and poverty
- early intervention and preventative care research
- government white and green papers on family, health and the early years
- the coalition's comprehensive spending review
- policy pronouncements and speeches from cabinet ministers on family, parenting, welfare and the early years
- · Childhood and Families Taskforce reports and statements
- reports and statements from the Independent Review on Poverty and Life Chances⁴⁷

Ethnography

Ethnography was chosen in order to bring the feelings and perceptions of children and parents to the fore.⁴⁸ An ethnographic approach is underpinned by three key principles: observation, listening and participation. The research methodology drew on these core principles throughout to explore local understanding of parenting from both children's and adults' perspectives. This enabled us to concentrate time and energy on exposing the layers of depth within family contexts and build up a wealth of information about them.

The methodology comprised a three-phased approach to encourage cycles of research and learning to ensure iterative learning took place. These included:

• *phase 1* – three focus groups with around 40 parents and 40 children at a primary school in a south London borough

- *phase 2* eight family case studies involving two-day visits to families and photo diaries
- *phase 3* one participatory family workshop involving all eight case study families

Details of analysis procedures and participants are set out in appendix A.

Polling

The authors designed a survey to add quantitative depth to the research methodology and provide an up to date and representative picture of how today's parents feel about parenting, support services, and pressures and influences on their lives.⁴⁹ The parents came from a research panel run by SurveyShack, with invitations sent to a sample of UK parents distributed by region, income, sex and ethnicity. There were 1,017 respondents (560 mothers and 457 fathers) and the results are not weighted. The online parenting forum iMama, which is part of We Are Family,⁵⁰ a new group of internet channels providing family oriented, video-led information on the internet to parents and carers, provided operational and analytical support. The demographic breakdown of the survey is set out in appendix C.

Longitudinal analysis

Analysts undertook regression analysis of the two major British longitudinal cohort studies – the British Cohort Study (1970–2000) and the Millennium Cohort Study (MCS), which began in 2000. It is important to note that while the British Cohort Study allows an examination of parental views alongside non-parents, the MCS only surveys parents. These regressions aimed to measure the intergenerational transmission of capabilities (such as emotional self-regulation, social skills and application) and the relationship between parenting style, parental confidence, household income, family structure and child outcomes. Additional secondary analysis (cross-tabulations, descriptive statistics) was used for descriptive information such as parental views on child behaviour at any one time and the extent of poor behaviour among the contemporary population.

Case studies with services

We identified and selected case studies of parenting support services according to a number of criteria: a variety of locations across England, a mixture of public sector and community and voluntary sector providers, and a broad range of aims and approaches. We selected five policy categories as areas to cover: evidence-based parenting programmes, home visiting and outreach, informal support, mental health support and 'father friendly' services. Within these categories, we profiled services that either had a strong evidence base or were particularly innovative in developing a unique approach to addressing a local issue.

Meet the parents

The eight families who took part in phases 2 and 3 of our ethnographic study have a combination of different family forms, ethnicities, ages and sizes. The families are not intended to be in any way 'representative' of British families as a whole indeed many of the families have below average income and a significant minority are immigrant families. However, there is great scope and variety among the families in the way they structure (or not) their daily life, how they split up responsibilities, who they count as part of their 'family', how they feel about their neighbourhoods and neighbours, what they struggle with, and so on. Each family portrait below is titled by the parent who was our primary contact in the research, although time was spent with each member of the families over the course of the study. It is important to note that all case study location and family member names have been changed for anonymity as per the ethical guidelines set out in appendix B.

Elaine

Elaine's family comprises six members including herself and her husband, Jason, Jason's sons from a previous relationship, Jake, aged 11, and Sean, aged 10, and Elaine and Jason's twin daughters, Eloise and Freya, aged 3. Elaine was six months pregnant at the time of the research. When they met, Jason was a single father with full-time responsibility for caring for Jake and Sean. He had separated from his first wife and subsequently became concerned for the well-being of his sons who were living with their mother. When social services investigated they discovered that the boys were being neglected and removed them from their mother's care.

Jason and Elaine live in a large four-bedroom house they rented from the council. Life is fairly chaotic. The children are very energetic and noisy, apart from Jake who is quiet, keeping himself quite separate from his siblings. Elaine previously worked as a nursery nurse but had decided to be a full-time mum to her children who, she said, needed her around because of their various problems. Jason has a part-time job sterilising instruments at a local hospital. Jason's income is supplemented through state benefits. Elaine spends all her time caring for the children, except on occasions when her friend Leslie can take them for a night or two. Jake is autistic and Sean has learning difficulties and attends a special educational needs school. He also suffers from epilepsy. The twins were both diagnosed with epilepsy during the research.

Michelle

Michelle's family comprises four members including herself and her husband, Simon, her daughter from a previous marriage, Kelly, aged 14, and their daughter Briony, aged 9. Michelle's first marriage ended three months after Kelly was born and she met Simon soon after. Simon works six days a week both in an administrative role at a local primary school and in the local cinema, and struggles to juggle his jobs with family commitments. Michelle works in a part-time administrative role at a local doctors' surgery. Michelle's mother Sarah plays a big role in the family's life. The family live in a terraced house with a garden that used to belong to Sarah but she swapped homes with Michelle and Simon, moving into their flat to give them more space. The neighbourhood is generally quiet and all the family knew their neighbours and had friends in the local area.

Michelle has suffered two nervous breakdowns, one shortly after Briony was born and the other last year. She is on medication and, provided she takes it regularly, she says she is fine. Simon blamed his mother-in-law, Sarah, for Michelle's problems, claiming that she can be very over-bearing and makes Michelle rather dependent on her. The relationship between the siblings Briony and Kelly is also fraught with difficulties. Kelly visits her biological father occasionally and this causes some tension with Briony, who is jealous of Kelly's 'other dad' and also wants two fathers. The two girls argue and physically fight with each other regularly and Michelle frequently claimed this is one of the biggest challenges she faces as a parent.

Shareen

Shareen's family comprises herself, her husband Sabir, their two daughters, Atiya, aged 14, Ayana, aged 12 and their son, Umar, aged 7. Shareen and Sabir are from Bangladesh and both moved to the UK when they were young children and were educated here. Their marriage had been arranged by their parents and they plan to arrange marriages for all their children. Shareen and Sabir have a large number of relatives living locally and see them often. They described their 'family' as encompassing their various brothers, sisters, parents and cousins, and frequently emphasised the important role these relatives played in their lives by providing advice, lending them money and generally creating a feeling of, what they called, 'togetherness' (Shareen, 31 July 2010).

Shareen's family live in a terraced house with a white picket-fence. They have a small garden at the back in which Shareen has planted flowers and grows vegetables. Although they are very comfortable in their home, all family members have concerns about the local area because of its reputation for crime, including gang and drug related violence. Shareen and Sabir run a very orderly household, imposing a strict daily routine with set times for getting up and going to bed, meals, study periods, TV time and exercise time. The family eats meals together and the girls like helping Shareen cook. They also budget carefully, allocating money for food and bills each week and making savings here and there to afford a family holiday each year. The family's Muslim faith features heavily in their daily routines and influences the extent to which Shareen and Sabir are strict parents. They place considerable value on education and organise extra tuition for all their children, including instruction in the Koran, every Saturday. Shareen and Sabir approach parenting as a team. They are careful never to undermine one another in the presence of their children and make decisions together.

Ronald

Ronald's family comprises himself, his wife, Iris, their son Ryan, aged 7, their daughter Yetsa, aged 6 months, and Ronald's younger brother Benji. Ronald's family live on a housing estate. Their flat is quite small and dark. Ryan sleeps on a large double bed in the living room, which is spartanly furnished with two sofas and a TV. Benji has one of the bedrooms and Ronald, Iris and Yetsa have the other. Ronald's dream is to move out of London to a larger house with a garden.

Ronald and Iris met at university in Accra, Ghana, and married a few years later. Even after they married, they lived apart because of Ronald's job. One year after Ryan was born, Ronald moved to the UK to train to become a teacher and was joined in the UK in December 2009 by his wife and son. Yetsa was born soon after. When we began the research, Ronald had just completed his PGCE and had the summer off. He was enjoying spending more time with his children, while Iris attended a course in care work with the elderly to enable her to get a job. Her plan is to return to education after she and Ronald had saved some money. Ronald is very supportive of Iris's plans to further her education and calls this their 'development plan' (Ronald, 27 July 2010).

Iris and Ronald are living together for the first time in their married life. Ronald is also getting used to being a father, having been absent for almost all of Ryan's life. He is especially enjoying taking care of Yetsa and claims that he wants her to be a 'daddy's girl' (Ronald, 27 July 2010). Ronald's approach with Yetsa is rather haphazard and Iris puts this down to his lack of experience. By contrast, Iris is extremely organised and takes control of household matters. However, Ronald gets involved in household chores too, doing the shopping and laundry while Iris is busy. Ronald and Iris call themselves a partnership and make decisions together. Iris says: 'if you don't decide together, you're not a couple' (Iris, 5 August 2010). Both Iris and Ronald have a calm manner and this is reflected in Ryan, who is generally very quiet and polite.

Hannah

Hannah's family comprises herself and her two daughters, Mia, aged 14, from her first marriage, and Afia, aged 5, following another more recent relationship. Hannah is from Sierra Leone and came to the UK as a refugee during the civil war (1991– 2000). She lost most of her family during the war, including her husband. She fled to the UK where she was granted asylum, and gave birth to both her daughters. Mia and Afia are half sisters and Hannah is no longer together with Afia's father, although he supports Hannah financially and visits the family most days.

Hannah's home is chaotic and noisy. Hannah and Afia shout at each other a lot and, even when they were simply conversing about ordinary routines, such as at mealtimes, they raise their voices. By contrast, Mia is very quiet, only occasionally raising her voice to Afia when she reprimands her for being naughty.

Hannah's family lives in a flat. The living room, which is the focal point of the home, is richly furnished with fancy carpets, leather sofas and a large TV, which was on during our visit at high volume. Mia and Afia share a room and Mia complains that Afia often refuses to sleep in her own bed and comes to sleep in hers. The neighbourhood is quiet and close to an area of fancy shops and restaurants. Hannah likes to walk around the shops with her daughters at weekends and genuinely seemed to enjoy living in the area.

Steve

Steve's family comprises him and his partner, Jennifer, who he met 12 years ago. They have two children, Brendon, aged 6, and Serena, a baby now several months old. Steve has had lots of difficult life experiences. He fell out with his parents, went to a school for 'naughty boys', has had children with various partners, and has spent time in prison. He also suffered from attention deficit hyperactivity disorder (ADHD) since he was a child, which he currently controls with marijuana rather than prescribed drugs. In spite of this, he is largely a law abiding member of society, looking after his children now. Jennifer, his current partner, is depressed and stressed, and does not know how to deal with either condition. She reportedly does very little around the home and likes to go out for big nights at the weekend. Brendon also suffers from ADHD. He is a creative, intelligent boy, but needs stimulation. He is out of the house a lot, running around the estate, and is a chatty and trusting boy. Serena, their new-born baby, was born prematurely and has been in and out of hospital since. She requires oxygen support at home.

The family lives in a large, three storey council house in an estate near the school, on the edge of a park. The home is chaotic with lots of people visiting and spending time there. The home appears to be a 'drop in centre' for everyone – neighbours, friends and friends' children. The open door policy, where people appear to walk in and out at will, is unpredictable. There are no real routines for the family. Neither parent has a permanent job. Brendon is the only person with real routine as he goes to school, but he takes himself there.

Kate

Kate's family comprises herself, aged 29, and her partner Marco, aged 31. Kate is British and Marco is originally from Jamaica, though he is quite cut off from the rest of his family who are still there. There are three children. Paige, aged 11, is Kate's eldest daughter and is in the first year of secondary school; her father was a Zimbabwean man who is no longer involved with the family. She presents herself as very 'urban', walking with a 'bop' and talking using lots of 'street' phrases. Kate and Marco's children are Kieran, aged 5, who is a lively, imaginative boy, and their daughter Skye, aged 5, who is initially shy, but soon comes out of herself, likes to play and also get her own way.

She grew up with her grandmother in south London from the age of 5. She calls her 'mum' as she looked after her when she was young. Her real mother gave birth to her when she was 17, and at this time, teenage pregnancy was not really accepted. Kate is close to her family with the exception of her father, of whom she made no reference. Her grandmother needs full-time care, which she helps to provide. She recently lost her brother, which rocked her and her family massively, and she said that she has distanced herself from Marco to deal with it.

The family lives on a small estate, which is a mixture of terraced council houses and low-rise blocks of flats. They live in a small flat in a block of flats on the ground floor. It has two bedrooms, a lounge, a bathroom and a small kitchen, and is kept very tidy. There did not seem to be much of a family routine, as it was school holidays when we visited them. Neither Kate nor Marco works, and Marco sleeps a lot. Kate is responsible for getting the children ready and out for school, and she takes control of the shopping and other home-based duties. The children's attendance at school is the only obvious structure.

Humera

Humera is married to Saadullah. Humera grew up in a Jewish area in north London, did a design degree at university, and during this time converted to Islam. She and her husband are orthodox Muslims. She is a loving mother and very calm and softly spoken. Saadullah is a friendly, easy-going man, and loving father. He works within the local NHS. Humera and Saadullah have five daughters. Shayla, aged 12, currently attends a girls' grammar school in north Kent and commutes there every day from home. Meriam, aged 10, is in her final year at the local primary school, and has just sat the exam to get into her sister's school. Hena, aged 8, is an intelligent, perceptive girl, who asks lots of questions, likes to act and play, and is extremely cheeky with a quick sense of humour. The two youngest are Arya, aged 6, who is quite shy and lacks the obvious confidence that the rest of the children have, and Chanda, aged 3, who tends to shout loudly to get some attention.

They live in a three storey home provided through a local housing association. The house is over three floors, though we were not allowed upstairs, and has four bedrooms. The parents have a room, the two oldest girls share and the three youngest share, with an extra room for visitors. The house has a front yard where the bikes are kept and there is a very neat small garden, where the family grows lots of vegetables. The house is very tidy, and there is lots of reference to Islam all around the home. The family appeared to be very routine-based. They eat breakfast together every morning, and there is a big table for the parents and the older kids, and a separate mini table for the younger kids. Humera does the school run and Saadullah works.

Learning from real life

The experience of living alongside these families and getting 'behind closed doors' gave rise to great insight on the pressures and influences on families today. It also allows us to channel the perspectives and voices of parents, children, friends, carers and extended family members straight into the policy debate. The first realisation that comes with engaging in this kind of in-depth research is the messiness and complexity of everyday life for families today. Generalisations about how to be a 'good' parent go out the window, and a web of schedules, chores, financial pressures and relationship tensions come in to take their place. And yet trends and insights do emerge. This report uses the experiences of these families in both an illustrative and an explanatory capacity. The next section attempts to map out the major influences and pressures on parents and draws out key themes and findings that can be of use to inform the policy debate about how to better support parents today.

Section 2 Influences on parenting

3 'Learning' to be a parent

There are many different ways of approaching the job of parenting and many different views about the 'best' way to do it. Overly prescriptive approaches to parenting can undermine parents' confidence and are rightly criticised. People of different cultures, religions or even 'classes' may have very different perspectives on the correct way to parent that should be respected. However, it is irresponsible not to acknowledge that some approaches are better than others and that there are clear relationships between parenting styles and child outcomes. In this chapter we first explore the evidence of what makes a good parent, before examining the views of parents in our study. The second part of the chapter looks at how attitudes to parenting are socialised and the places parents go to seek advice.

What makes a good parent?

Although there is a wealth of views and theories about what makes a good parent, accepted and evidence-based theories share some important aspects of parenting in common: the presence of warmth or loving attachment as well as consistency or clear expectations and rules.

'Good enough parenting' is an approach towards parenting – first identified by child psychologist Donald Winnicott – that takes a 'realistic' view of parenting. The approach does not demand perfection from parents but instead looks at a parent's general attitude and behaviour. The focus is on providing consistent and unconditional love, care and commitment in a positive way through spending time with the child. Good enough parenting explicitly rejects fetishising parenting rules or formulas, which are both counterproductive.

In practical terms, good enough parenting attempts to develop a sense of attachment and security by delivering active

and loving parenting with a particular focus on the first five years. The consistency of meeting physical and emotional needs facilitates child development and builds a firm foundation for an emotionally secure childhood. The approach advocates low levels of criticism coupled with high levels of warmth. Parents should engage in child-focused activities and make sure that they spend decent amounts of time with their children. Although the approach does not provide a paradigm of parenting it is useful in assessing how 'not good enough' parents go wrong.

'Democratic parenting' is the name for an alternative model of good parenting, which instead focuses on encouraging responsibility by involving children in decision-making. From an early age children are taught to think for themselves and brought into decision-making procedures that affect them. An emphasis is placed on making sure children have clear and simple expectations – this is achieved by setting out clear behavioural standards and applying them consistently. When children fail to meet these standards of behaviour they have this explained to them; they are told why such behaviour is unacceptable. The rationale is that by treating children with respect and according them responsibility for their actions they will become sensitive to the consequences of their actions.

Like good enough parenting, the focus is on positive behaviour but democratic parents place an additional emphasis on the consistency of behavioural standards and the importance of children's autonomy. By encouraging children to help with appropriate jobs around the house, children learn to take ownership of the responsibility for a task. Crucially democratic parenting is not about according high levels of freedom to children but about giving them choices within appropriate boundaries so that responsibility is gradually introduced in a measured fashion. By nurturing a child's independence, children become autonomous, curious and mature people.

Martina Klett-Davies, author of *Is Parenting a Class Issue?*,⁵¹ argues class is still an important concept when looking at good and bad parenting. Specifically, good parenting has become conflated with middle class parenting. Klett-Davies suggests we must 'recognise that "good" parenting is identified with "middle

class" values and practices'. Her analysis sees the family as a major cause of the entrenchment of class inequalities, economically and culturally. Parental styles and effectiveness can be linked to class. Class, so it is argued, affects mothers' interactions with daughters so that before the age of 4 children have different understandings of work, gender and access to resources based on the class-infused lessons they have been taught.

Although there are competing theories of what 'good parenting' amounts to, a robust definition will focus on child outcomes. Following the trajectory of a wide body of psychological research, Reeves and Lexmond used a longitudinal data set to explore the elements of parenting style that are most effective for child well-being and development.⁵² Parenting styles were grouped into four main categories, defined in box 1.

Box 1 Baumrind's parenting typology⁵³

'Tough love' or authoritative54

This parenting style combines a warm and responsive approach to child rearing with consistent enforcement of rules and clear boundaries. Parents are assertive without being aggressive or restrictive and the aim of their disciplinary methods is to reason with and support their child rather than to be punitive.

Laissez-faire

Parents who adopt this style of parenting are highly responsive, but undemanding in their approach to discipline and generally non-confrontational. These parents are non-traditional and engaged in their approach, opting for a lenient and democratic household that allows children considerable opportunity to develop at their own pace.

Authoritarian

This parenting style is characterised by firm discipline and rule-based parenting practices but without much regard for children's feelings or perspective. In some cases parents can be hostile in interactions with children and may find it difficult to show affection and warmth. These parents typically value obedience and structured environments over freedom and exploration.

Disengaged (and, at the extreme, neglectful)

Parents who adopt this style are generally hands off in their approach to parenting. They are rarely warm or consistent. The home environment may be chaotic and interactions there can be characterised by extreme emotional ups and downs. In extreme cases, children with 'disengaged' parents are considered at risk of neglect. The lack of engagement that characterises this approach can result in the development of what psychologists call 'callousness' in children.⁵⁵ 'Callous' children grow up lacking a sense of empathy and guilt, and learn to see others in a purely instrumental way.

Analysis of the Millennium Cohort Study revealed that the most effective parenting style combined warmth and responsiveness with consistency in rule enforcement (figure 1). Parental confidence and self-esteem was found to be positively associated with this parenting style.

Of course, in an ideal world, all parents would come to the decision to have children fully equipped with the detail of what effective parenting entails and how to deliver it. In practice, parenting behaviour is determined by a range of factors, most notably, parents' own attitudes and predisposition to parenting.

Ideas about good parenting

Case study families expressed different conceptions of what makes 'good parenting' explicitly and implicitly through the way they interacted with each other and managed their homes. All the parents and children had strong views about parenting.

For example, Kate and Marco felt strongly about teaching their children about right and wrong and instilling principles in them that would stand their children in good stead and help them make the best decisions in the future. Although Kate and

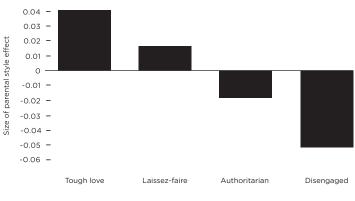


Figure 1 Effect on parenting styles on child outcomes

Quadrant

Marco parented with few explicit rules and structures, they set clear examples about right and wrong for their children, which served to provide structure in their lives.

Humera believed in a 'nurturing' approach to child rearing and was keen to adapt to the needs of her children as they developed. A central aspect of her parenting style was to encourage her children to think for themselves, but talk about issues as they grew up. It was clear that Humera was a thoughtful person, who had a very considered approach to life. She was a friendly, fun, democratic mother, asking her daughters what they wanted to do, and always listening and responding to what they had to say.

Parents like Shareen and Sabir played their role as parents in a very formal and engaged way, to the extent of planning much of their children's futures for them. Shareen and Sabir had a clear idea of what they wanted for their children and this included details about the kind of education they would receive, the career that each child would go on to pursue and the partner that their children will eventually marry (Shareen and Sabir met each other through an arranged marriage and plan to do the same for their children.)

In contrast to this, other parents showed little interest or sense of responsibility in so far as their parenting approach was concerned. For example, Steve was largely reliant on other actors, such as the police and social services, to help influence Brendon's future and did little to impose structure or expectations on Brendon.

Children also had some strong ideas about what kind of parents they wanted to be when they grew up. During a workshop activity, children were asked to choose what kind of parents they wanted to be when they grew up by positioning themselves in the appropriate place on the parenting axis. In almost all cases, the positions children chose reflected their desire to be parents who gave lots of cuddles to their children and who were midway between being easy-going and strict.

Attitudes to parenting are shaped by a number of factors. In this next section, we explore the key influences on parenting and how they manifest in behaviour.

What shapes parenting style?

In our parenting poll, parents were asked to rate a set of influences on their parental style. Parents rate 'their own parents' as the greatest influence on their parenting style, but this is followed by 'friends', 'professional advice', 'parenting books', 'things on TV or in magazines' and, finally, 'government literature and information' (figure 2).

Four-fifths (80 per cent) of parents polled felt that parenting should be guided by 'intuition' over professional advice.

This section will explore the primary influence on parenting style (the way we were parented) as well as a series of secondary influences. In our ethnographic study, friends, pop culture, professional advice, religion and even career were all cited as key influences. Despite the proliferation of government literature on parenting and the growth of the 'parent practitioner' workforce, parents are still more likely to absorb

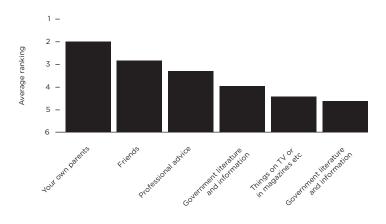


Figure 2 The influences on parenting style

Ranked from 1 (most influence) to 6 (least influence)

information about parenting from friends or pop culture than from government.

The intergenerational transmission of parenting

Theories of cultural and social reproduction from Bourdieu and Chodorow shed light on the crucial role the family plays in the transfer of values and traditions from one generation to the next.⁵⁶ The same transfer occurs in relation to parenting.

Chen and Kaplan note that 'present-day parents tend to use similar parenting strategies or practices that they themselves received in their childhood.'⁵⁷ Although harsh parents are more likely to produce children who will grow up to be harsh parents themselves, constructive parenting styles are also transferred from parents to children.

There is fairly extensive evidence that attitudes to fundamental aspects of parenting are socialised in the home. For instance, children of mothers who held a traditional 'home maker' view of women's roles within the family are much more likely to share these views.⁵⁸ There is strong evidence for the transfer of an array of practices and attitudes within the family from parents to children. Both positive parenting practices such as breastfeeding and negative practices such as smoking are transferred from parents to children.⁵⁹

The same transfer occurs between parents and children in relation to parenting skills or capabilities, and from an early age. The transmission of these skills could be strongly related to other types of advantage or disadvantage.

Capabilities like empathy and self-control, both of which are key to parental effectiveness, have established intergenerational links. For example, scholars at Ghent University found that maternal support significantly predicted levels of empathy in their children. They also found, although in a less strong association, correlations between maternal attachment and behavioural and psychological control.⁶⁰

Similarly, Boutwell and Beaver find that 'low levels of selfcontrol – a major predictor of... antisocial outcomes – [are] passed along generational lines' through analysis of data from the Fragile Families and Child Wellbeing Study.61 Specifically, the results of the analysis show that both maternal and paternal levels of self-control were predictive of the child's levels of selfcontrol. Furthermore, the connection does not appear to be genetic, but socialised. The paper cites Gottfredson and Hirschi,⁶² who argue that the development of self-control is due to three parental management techniques: proper supervision and monitoring of children; parental recognition of a child's antisocial behaviour; and a consistent approach to punishment and correction of wayward conduct. A number of studies are referenced to support the claim 'that parents who do not engage in these parenting practices will, on average, raise children with lower levels of self-control'.

Demos tested the transmission of similar capabilities through analysis of the British Cohort Study (cohort born in 1970) capturing the data across several generations: parents were surveyed in the ten-year follow up (1980), and their children were surveyed in the Parent and Child questionnaire during the 34-year follow up (2004) when they were between 6 and 16 years of age. The results establish that there is an observable and statistically significant association between parents and children when comparing empathy, social skills and self-regulation, even when data from parents are taken *before* they become parents.⁶³

Factors that can limit the damage within at-risk families include maternal educational attainment and positive parenting practices including emotional warmth and consistent discipline. Thus researchers have emphasised the need for preventive interventions aimed at breaking intergenerational cycles in poor parenting practices.⁶⁴

Learning from parents

Parents talked about both positive and negative impacts that arose from the experiences of parenting that they had when they were children. For example, Marco's mother was extremely strict and instilled in him the importance of ensuring that children know the difference between right and wrong. Consequently, Marco applied these rules to parenting his own children.

Likewise, Jason, Ronald and Iris were all heavily influenced by their own parents' approaches, which had all emphasised the importance of children learning about respect for their elders and of keeping the family together. Jason, in particular, was concerned about Elaine's somewhat fractious relationship with his son and stated that he wanted to help them develop a more positive relationship now so that the family remained a strong unit and Jake didn't resent Elaine later in life.

Shareen and Sabir were both influenced by their experiences of growing up and the relative importance, or affordability, of education for their children. Shareen said that she and her husband were not well educated, and as a result they 'didn't get far in life' in terms of qualifications and careers. This has led to a regime of education in and out of school, and encouraging their children to achieve well-qualified professional careers, which will bring in good salaries for them and their future families.

In contrast, the relationship between Steve and Brendon is influenced by the lack of a loving relationship which Steve had with his own parents. He explained that he never received love and attention, or physical contact in the form of hugs and kisses, from his father, and this has transferred to the relationship he has with Brendon where he is neither affectionate nor openly loving.

We also observed the transfer of practices and attitudes between parents and children that foreshadow the children's future parenting style. It was striking to observe how children, whether consciously or subconsciously, copied their parents' characteristics, behaviour and mannerisms. For example, Ryan expressed similar mannerisms to his father, conveying a calm and patient attitude, which was the mirror image of Ronald's placid approach to life. By contrast, Afia was extremely noisy and full of energy and her mother, Hannah, repeatedly commented – and was pleased – that Afia was like her.

Children were also deliberate in their attempts to be like parents. Atiya and Ayana prided themselves on being like their mother and liked pleasing her by doing things in the same way she did them, such as making their bed with 'no crisp or crease' (Shareen, 31 July 2010). The girls copied their mother's ordered approach in the home by always putting their books and clothes away in the right place and continually clearing up after themselves. However, while children, particularly in the preadolescent phase, may copy parents, it cannot be assumed that their behaviour will continue when they are adults. To what extent do these experiences translate into particular styles of parenting?

The influence of friends

Some parents in the study group looked towards other families for inspiration about their parenting approach. This usually involved parents getting ideas for being a 'good parent' from watching more successful families and applying their techniques themselves:

I look for a successful family and try to follow their example. You look for a family who are more successful than you.

Parent, focus group discussion, 13 July 2010

There is an extensive literature on the impact that friends and social networks have on influencing parenting style. The size and quality of social networks, as well as increases or decreases in their size, have a great effect on parental self-esteem and confidence. Additionally, the dominant parenting style in a neighbourhood can influence other parents by increasing collective efficacy and community parenting. This evidence is examined in detail in chapter 5.

The influence of religion

Religion was important for Humera and Shareen. The way Humera acted as a parent was in part determined by the age of her children following guidelines in the Koran. This suggests that until the age of 7 children are supposed to enjoy their childhoods, but from this point onwards they are encouraged to learn new responsibilities, as well as norms associated with their sex. Religion also emerged as a theme in focus group discussions:

We're Christians, we go to church. The children learn from church. They learn not to use bad words. I ask them 'Are you a child of God or a child of the Devil?' This will teach children to tell the truth. At the moment, it's working!

Parent, focus group discussion, 6 July 2010

The influence of religion on parenting is echoed in the broader research literature on parenting style. In a recent report from the Joseph Rowntree Foundation, researchers found that most religious parents believe bringing up their children in their faith is an important part of parenting. For these religious parents, religion is more than a set of background beliefs: it can provide guidance through holy books and participation in faith communities. Most parents, and some young people, emphasised a religious way of life is transmitted between generations, and grandparents have a significant influence. Parents saw passing on their faith as an important part of parenting.⁶⁵

The influence of pop culture

TV programmes and pop culture influenced families by providing not only knowledge and advice about parenting, but also opportunities and forums for discussing parenting and family life:

There's a TV programme called I'm Killing My Kid. It's taught me how important fruit and vegetables are and how this can change your child's behaviour.

Parent, focus group discussion, 13 July 2010

My son likes watching Supernanny because he likes to have a debate with me about the children. They have a debate about what's happening in Supernanny. He says he'd never behave like that... Sometimes my son will pull me up on my parenting!

Parent, focus group discussion, 13 July 2010

TV provides a clear source of influence: there has been a recent proliferation of programmes focusing on parenting, such as *Supernanny, Wife Swap* and *Driving Mum and Dad Mad*. The Department for Children, Families and Schools (DCSF) carried out research on parents who watched the last of these shows and concluded, 'It is possible to bring about significant improvements in parents' reports of their child's behaviour using a media based universal parenting intervention.'⁶⁶ Parents who watched the show and used the web-based support reported improvements in their child's behaviour and the effectiveness of their parenting.

Ipsos MORI polling of 3,938 parents in 2006 found that 72 per cent of parents with children under 16 had watched at least one parenting programme; of these 83 per cent found something helpful in a show. More than half thought these programmes enabled them to better understand their child's needs and feelings, and how good parenting contributes to a child's behaviour. Yet there are also concerns about the reliability of the advice in these TV shows which are, at base, entertainment programmes rather than public information broadcasts. Fears that these shows can sensationalise behaviour are set against the good lessons parents can learn.

Conclusion

Embedded in these findings are some important lessons for policy makers. Generally, parenting advice makes parents feel more confident, not less confident, about their own abilities (Demos' own polling found that only 10 per cent of parents felt less confident after receiving parenting advice and information, compared with 35 per cent who felt more confident, and 55 per cent who felt the same). However, if we wish to impact significantly on parenting style and attitude, we need to ensure that parents have access to appropriate networks and people trusted sources. Government literature does not seem to be viewed as a 'trusted source', although the research here did not enable us to get underneath that finding and understand why. Rather, friends, family and one's own experience of being parented are the most important influences on parenting behaviour. The impact of one's own parents draws attention to the need for preventative interventions aimed at breaking intergenerational cycles of poor parenting.

4 Relationships at home

Relationships between partners, parents, siblings and extended family are complex and changeable. They are also of course the most intensely personal aspects of what happens in the home, and many people object to the idea of intervention or even support. And yet the quality of relationships at home is perhaps the greatest influence on parenting.⁶⁷

This chapter explores the influence of these relationships – between partners, parent and child, and siblings – on key aspects of parenting style such as warmth, consistency and confidence. It demonstrates the interdependence between all players in the family and the way that virtuous and vicious cycles of behaviour can develop. Particular attention will be paid to the perspective of children themselves. Children are active players in the parenting relationship but their agency can be overlooked by researchers and policy makers in this area. However, they are perceptive, shrewd observers of family dynamics.

Parent-child relationships

It is a self-evident fact that children are a major influence on parenting, but all too often the child is left out of assessments of parental influences. Children's differing behaviour, temperaments and physical health will inevitably influence parental effectiveness. Children's behaviour is not simply the result of different parental inputs. On the contrary, children play a key role in family life, constructing views of their parents, supporting them around the house or employing strategies of their own to subvert or ignore their efforts. Factors at play even before birth such as foetal health and development can result in health and behavioural difficulties for some children. Each child in a family presents a set of unique pressures and demands on parents, and these pressures change over time as children grow up and as parents respond and adjust to their child's changing needs. Taking account of these complex relationships and the ways that they are influenced is key to developing effective policy and support services for families.

Parenting different age groups

Our ethnographic research showed how parents often struggled with being consistent particularly when it came to differences in treatment between children. Age was an important differentiating factor, which meant that it was difficult to be consistent with children, and in many cases inappropriate to do so. Even so, these differences could cause problems. For example, in Michelle's family, Simon emphasised that it was impossible to look after, regulate or punish children in the same way if they are different ages because they would have different capacities for understanding right and wrong. This example illustrates findings from studies in the wider evidence base.

The Avon Longitudinal Study of Parents and Children (ALSPAC), which tracked children and their parents from birth to 33 months, found significant variation in parenting across the study period.⁶⁸ Changes to parenting style were captured by a parenting score that combined maternal responses to eight ALSPAC survey questions into a compound score measuring parental attitudes, behaviour and feelings towards the child.⁶⁹ Less than one in five families (18.5 per cent) had stable parenting scores across the study period. Particularly, the average parenting score decreased for 47 per cent of parents of children aged between 8 and 33 months and increased for only 35 per cent.⁷⁰ This suggests that the skill of parenting is not necessarily acquired over time, but rather requires adaptation and creativity.

The study seems to show that parenting gets harder as young children develop. This is likely to be partly due to the increasing age of the child: at 8 months children are still infants and hence relatively immobile, still sleep a lot, and are dependent on their carer. However, by 33 months, the child is more developed and thus more mobile, relatively independent and increasingly concerned with their own autonomy. The authors predict that once children move on from the 'terrible 2s' to school age, parenting will improve again as parents will be less likely to suffer from lack of confidence with their child, perceive a lack of time for themselves or feel despondent about the amount of mess created by their child. This will lead to improvements in parenting.⁷¹

Evidence from parent focus groups in Demos' ethnographic study illustrates these findings and indicates that the highs and lows of parenting continue as children reach adolescence. For example, some parents talked about their worry that they became less effective as parents with their second or third child because they were less careful and did things less 'by the book' than with their first child. Other parents talked about how their confidence levels plunged around the time that their child began the transition into secondary school and the associated concerns of adolescence. This evidence is important partly because it suggests there is a need to tailor support to parents as children age.

Differing parenting style in the context of children's behaviour and temperament

Parents sometimes deliberately treated their children differently as a result of their children's individual health needs, personalities or behaviour. In other cases, parents' approaches were born more out of a sense of helplessness or frustration at not being able to control or manage their child. Children very quickly picked up on differing treatment between them and their siblings, and this usually resulted in anger and frustration, serving as another influence on parents' responsiveness and manner with the child.

Humera recognised that her children had different personalities and needed to be interacted with differently in order to encourage them to grow as individuals. For example, the second youngest daughter was very shy and liked to do things with the support of other people, lacking the confidence to carry out activities on her own. By contrast, the middle daughter, Hena, was cheeky and has a dominant personality. Humera recognised that her daughters needed different approaches to nurture their different personalities.

Conversely, the relationship between Brendon and each of his parents was located in a sense of helplessness about his behaviour and feeling they were out of control. Brendon has ADHD and struggles to control himself and stay calm; Steve struggles to manage his behaviour and feels frustrated with his inability to control him. This had a clear, negative impact on Steve's parenting style that was often based on standing over Brendon and shouting.

Children with siblings often felt that differences in treatment between them were unjust, citing the favouring of one child over another as a particular problem. For example, Jake frequently expressed his dissatisfaction with Elaine's approach to parenting her children and step-children, claiming that she was stricter with him and generally punished him more than his siblings. Elaine was open about the fact that the different needs of her children, especially given their various learning disabilities and health problems, meant that she needed to treat them all differently. Moreover, she said that she constantly explained this to the children so they would know the reasons behind her differential approach. Despite this she was aware that Jake, in particular, was unhappy, a problem that made her angry and frustrated, and affected her ability to stay positive and responsive. During a visit to the family psychologist at the local hospital, she complained bitterly about Jake's behaviour and his inability to understand that she could not simply give the same punishments to Sean because of his learning difficulties.

Differential susceptibility

A new evidence base suggests that the development of behavioural problems could be linked to pre-birth factors. A growing body of research shows that as a result of genetic and environmental circumstances children with vulnerable 'temperaments' are more susceptible to good or bad parenting than more temperamentally stable children. Temperamentally vulnerable children are those with poor self-regulation, sociability and reactivity.

A US study in 2005 showed infants with high negative emotionality in their early years benefited disproportionately from strongly supportive rearing environments.⁷² In 2000 a study showed that proactive parenting resulted in more pronounced beneficial outcomes for children at age 7 for those children who scored highly on externalising problems such as aggression, anger or disobedience.⁷³ Research from the Australian Temperament Project (ATP) found that rates of problems were much higher among temperamentally vulnerable adolescents who experienced poorer quality parenting than among adolescents with a similar temperamental style who received better quality parenting to address these problems. On the other hand, rates of problems were low among temperamentally 'easy' adolescents, regardless of the quality of parenting received.⁷⁴

Significantly, research shows that vulnerable temperaments in infants are thought to be related to factors such as ill-health or high stress levels in the mother while the child in still in the womb. Also known as foetal programming, factors like stress, violence, or alcohol and drug abuse occurring during pregnancy can have the effect of hardwiring heightened susceptibility into the child before birth. Elevated levels of the stress hormone cortisol is tied to negative temperament in infants and heightened cortisol levels in children at age 10.⁷⁵

Temperamentally vulnerable children are also more likely to be found in lower income groups. The Millennium Cohort Study captures data on a child's temperament from birth. Children from lower socio-economic backgrounds were twice as likely to suffer from temperamental vulnerability as those in the top income quintile: slightly less than 8 per cent of children in the top income quintile suffered from borderline conduct problems compared with almost 16 per cent in the bottom income quintile; and 4 per cent of children in the top income quintile suffered abnormal scores, compared with 17 per cent in the bottom income quintile.

This evidence tells us that factors such as poverty, poor parenting or poor-quality childcare present a greater risk to

differentially susceptible children than to their temperamentally calmer counterparts. On the other hand, if these children are properly identified and interventions occur at the right time and place, there is every possibility for these children to buck the trend, and even surpass their more advantaged peers.

Partner relationships

It is nothing new to state that strong couple relationships are important in supporting good parenting. However, there is a great deal of confusion over what aspects of couple relationships really serve to support better parenting. This section explores the effect of partner relationship dynamics on parenting by exploring both parents' and children's perspectives. It also examines the impact of relationship breakdown on parenting ability and how to tackle and mitigate negative impacts.

Conflict in relationships

Poor or problematic relationships were observed in several of the study families. Conflict took the form of arguments, physical abuse, undermining of each others' parenting style and overt criticism in front of children.

For example, arguments between Steve and Jennifer sometimes tipped over into physical violence. Because they were not functioning well as a parenting unit, there were no combined efforts to be a parenting team together, or have ideas about how to plan for the kids' futures.

Another key source of parental conflict from the ethnographic research arose from one parent feeling more or less successful than the other at handling the child. For example, Hannah said that Afia's father is too lenient. This led to Hannah developing a reputation for being strict and unloving while Afia preferred her dad because he was so easy going with her. This led to problems when Afia's father was not around, with Afia throwing tantrums because she did not get her own way.

Of course, conflict occurs in every relationship and it is neither feasible nor desirable to try to get rid of it altogether. But determining how much conflict is typical or normal between spouses is difficult, although there have been attempts to estimate this.⁷⁶ Most research into the issue has concluded that each couple is unique and the idea of an 'argument' is so subjective that measuring them is almost impossible.⁷⁷

Furthermore, averages of the number of disagreements across marriages are probably not meaningful because different types of marriages exhibit different amounts of conflict.⁷⁸ Some couples construct a relational culture where they argue frequently; others experience disagreements infrequently and develop a norm to disagree only on issues of importance. Developmental patterns, however, can be consistent. For example, older spouses who have been married for a longer period of time engage in fewer overt disagreements compared with younger newlyweds.⁷⁹

Although the mere frequency of disagreements reveals very little about the overall health or stability of marital relationships, the seriousness of disputes, and the manner in which they are managed,⁸⁰ is more significant.

The greater challenge is to understand how such conflict impacts on parenting and child well-being, and to identify strategies that could mitigate this impact.

Effects of conflict on children

The effects of conflict between partners on children are well documented and understood. Children of all ages are affected by inter-parental conflict, with observed effects ranging from anxiety, depression, aggression, hostility, IQ deficits, low academic attainment, poor peer relations, and behaviour and attention problems.⁸¹ Even conflict between couples before the birth of a child has been found to predict insecure attachment between parent and child because of the higher likelihood of insensitive parenting.⁸²

Children's appraisals of how parents behave towards each other also shape how children expect their parents to behave towards them. Child-related conflicts between parents are particularly damaging: they are very likely to undermine children's sense of security because they signify family dissolution and potential spillover of hostility from inter-parental conflicts to parent-child interactions.

In their emotional security hypothesis, Cummings and Davies posit that children's efforts to regulate exposure to interparental conflict are a result of their attempts to maintain emotional security.⁸³ They do this by either engaging or disengaging in the conflicts, with some evidence suggesting that engaging in the conflict can have greater negative outcomes than withdrawing.⁸⁴

In Demos' ethnographic study, marked differences between partners in parenting approach had a strong impact on children's perceptions of their parents, which often led to the child changing their behaviour with different parents. Children also expressed embarrassment at their parents' arguing, and it appeared to undermine respect between child and parent. Briony was both embarrassed and very aware of her parents' relationship problems; during one of her parents' rows, she commented that 'they're arguing again...' and that they argue 'everyday, they do it all the time' (Briony, 3 August 2010). When Briony was asked why she thought her parents argued, she discussed them not respecting each other and said 'if you don't have that, well, you know the saying: "what goes around comes around"' (Briony, 3 August 2010).

Steve and Jennifer's son Brendon often 'acted up' in a way that appeared to reflect his parents' behaviour towards each other. For example, Steve and Jennifer had a volatile relationship that occasionally resulted in Steve hitting Jennifer. Brendon had observed this and the power imbalance between Steve and Jennifer caused great difficulty for Jennifer in keeping control over Brendon. For example, although Brendon generally responded to his dad's attempts to discipline him by 'running off' with his mother, he tended to be more conflictual with his mother and would stand his ground and shout and argue with her.

Effects of conflict on parenting

Fighting with a partner can undermine confidence, and the ability to make shared decisions and act in partnership. In examples of strong couple relationships in our study, good communication between parents led to improved parental confidence and effectiveness. Being united as a unit was a strategy used by parents to ensure that children were provided with stability and consistency. This involved parents agreeing about their approach and giving consistent advice and answers to children. For example, Iris and Ronald displayed a mutual respect for one another and took an equal share in decision making. Iris said, 'if you don't decide together, you're not a couple' (Iris, 5 August 2010). They conveyed a sense of being a team and had a plan for their family, which they both stood behind.

Conversely, in our ethnographic study, unsupportive partners had a negative effect on parents' emotional stability and parenting confidence by being overly critical. Michelle felt undermined by other members of her family. Her partner, Simon, openly criticised her in front of the children, giving licence to her daughters to do the same. They criticised and teased her, and Briony's approach to Michelle, in particular, was to tease and taunt her and generally not take her mother seriously. For example, Briony would lock her mum out of the house, hide and yell at her, while Kelly would criticise how Michelle dealt with these situations, saying 'you should just ignore her when she does that' and 'you shouldn't let her do that' (Kelly, 15 August 2010).

The impact of relationship breakdown on partners has been widely investigated and the effects on mental health and well-being are widely understood. There has been less focus on how relationship breakdown effects partners in their parenting role, but there is a growing evidence base. Any relationship between a parent and child cannot be properly understood without considering that parent's relationship with the other parent (even if he or she is absent). Much of this material shows that subsequent changes to parenting style goes on to reinforce the negative effects of the relationship breakdown itself on both parent and child.

One study explains how conflict and relationship breakdown affects parental well-being citing that there is a corrosive effect of guilt on parents, and parental anxiety about the impact of their conflicts on their child's academic performance and mental health. The study also found that relationship breakdown has a negative effect on parental effectiveness, with all parents in the study reporting that conflict with their partner made parenting more stressful, that boundaries were harder to maintain because they were not consistently applied by both parents, and that parents found it harder to be firm about rules and discipline because of the levels of guilt they felt. Parents often reported undermining rules and boundaries set by their partner, which led to greater hostility between the parents and less structure for the child. Finally, parents found it very difficult to think clearly when consumed with anger towards their partner.85

Each parent can indirectly influence their child through their relationship with their spouse. For example, 'Mothers who have close, supportive relationships with their husbands tend to interact more patiently and sensitively with their babies than do mothers who are experiencing marital tension and who feel that they are raising their children largely without help.'⁸⁶ Mothers can also exert an indirect influence: fathers who argue frequently with their spouse are less supportive and engaged than fathers who argue rarely. This evidence endorses the idea that parents need some level of teamwork since they both have the ability to undermine each other's effectiveness, directly and indirectly.⁸⁷

The link between structure and relationship quality

Relationship structure is often said to be a predictor of stable families, but the most compelling evidence suggests that it is the quality of relationships that matters more in predicting family stability.

An important longitudinal study conducted in 1999 found that while divorce always had a negative impact on children's behavioural problems, those children whose parents remained in high conflict relationships throughout the study had the worst behavioural outcomes of all.⁸⁸ The research review conducted for DCSF by Mooney et al in 2009 also concluded that the quality of family relationships was far more important to children's outcomes than family structure:

While family transitions place children at an increased risk of negative outcomes, the evidence shows that relatively few children and adolescents experience enduring problems, and some children can actually benefit when it brings to an end a 'harmful' family situation, for example where there are high levels of parental conflict, including violence.⁸⁹

In the case of single parents, much evidence points to the conclusion that a single parent can function more effectively as a parent than two parents who are experiencing high levels of conflict. The advantages of living with married parents are not shared equally by all children. One study finds that compared with families with low levels of conflict, children from high conflict families have an increased likelihood of dropping out of school, poor grades, smoking, binge drinking, marijuana use, early sex, non-marital fertility and union dissolution.⁹⁰

For example, Pike et al found in their study of family relationships:

Although lone-mother households in [their] sample had poorer socioeconomic circumstances and received little support from the nonresident parent, they were no different from two-parent homes in the quality of relationships between mothers and their children and how these relationships were affected by their setting.⁹¹

Research by the Children's Society and One Plus One has also indicated that changes to family structure have a particularly negative impact on children's well-being, rather than family structure itself.⁹² Single parent families may therefore provide children with a more stable family environment than married step-families.⁹³

The current debate on structure versus relationship quality is based on the issue of cohabitation as an alternative to marriage. The evidence on differences between cohabiting and married couples is complex. Ostensibly, cohabiting couples are more likely than married couples to separate. For example, in one study of adults aged 16 to 54, around four in five adults (82 per cent) who were married in 1991 were living with the same partner in 2001. The equivalent figure for adults cohabiting in 1991 was around three in five (61 per cent), of whom around two-thirds (of those remaining with the same partner) had converted their cohabitation to a marriage by 2001.⁹⁴ However, this analysis may be less revealing than it seems. Because cohabitation has become a precursor to marriage, it is entirely understandable that more cohabiting couples than married couples should break up. For many, cohabitation has become a testing ground before a longerterm commitment is made. It is therefore inappropriate to compare dissolution of cohabitees with divorce in marriage.

The relationship that should be the main concern of policy makers is the one between parent and child, which is where the stability of partner relationships can become an issue of child well-being. Perhaps most importantly, separation and divorce does not affect all children in the same way. Some children are more resilient than others, enabling them to cope better with the negative impacts of relationship breakdown,⁹⁵ while these negative impacts are also 'mediated to some extent through the parent–child relationship'.⁹⁶ Investing in parenting programmes that build children's resilience and strengthen parent–child relationships could therefore go some way towards protecting children from some of the poor outcomes associated with relationship breakdown.

The next section explores how conflict can be reduced or managed, and the impact on parenting lessened.

Reducing the impact of conflict and improving parenting

Couples' transition points

The transition to parenthood places a unique strain on couple relationships, with the majority resulting in relationship decline.⁹⁷ Only 18–33 per cent of couples report improved relationship satisfaction after having a child.⁹⁸ Many studies

conclude that the birth of a first child is the most difficult transition point for parents⁹⁹ causing a major period of disequilibrium.¹⁰⁰ Although many think that a baby would automatically bring parents closer together, research finds that in reality couples become less satisfied after having children.¹⁰¹ Positive interaction decreases between spouses after the first child is born¹⁰² and conflict levels increase.¹⁰³ Additionally, many couples divorce or separate in the first five years of their first child's life.¹⁰⁴ Where relationships do continue, the state of the relationship in the early years tends to shape the quality of the relationship as the years go by.¹⁰⁵

The way that having a child affects each partner in their relationship is also of significance. In a comprehensive review of 90 studies comparing parenthood with marital satisfaction, Twenge et al found that in addition to parents having lower marital satisfaction than non-parents, mothers with infants had markedly lower satisfaction that fathers.¹⁰⁶

Additionally, the study found that children had a greater negative effect on higher socio-economic status groups. This suggests that income is not a major factor. Rather they conclude:

A decline in marital satisfaction is more likely to be related to increased role conflict within the individual partners as well as the restriction of freedom imposed with parenthood. Women are particularly likely to experience role conflict and restrictions, particularly after childbirth and when the children are young. Women in higher social economic groups with often more satisfying careers may be more likely to experience this conflict.¹⁰⁷

The transition to parenthood is a major challenge for parents and a key point for providing intervention and support. The differing impacts on children, mothers and fathers, and socio-economic status are potentially of importance for policy makers when considering how to best support parents at this key transition point. Ultimately, the quality of partners' relationships before the birth of their baby is the best predictor of their relationship quality as parents. Introducing children into the picture will neither drive happy parents apart nor bring unhappy parents together.¹⁰⁸

Supportive relationship strategies

Given what is known about the pressures of parenthood on relationship satisfaction and stability, how can these pressures be alleviated?

In 1991 Stafford and Canary set about defining the aspects of relationship quality and investigating the strategies that would increase quality.¹⁰⁹ They defined quality as satisfaction, control mutuality (how far couples agree on issues where one partner has the right to influence the other), trust and commitment. They found five strategies that maintained high quality relationships:

- · sharing tasks, for example splitting housework equally
- · social networks, or including family and friends in activities
- assurances, for example stressing love and commitments
- positivity, being upbeat and cheerful and not criticising one's partner
- · openness, or directly discussing the nature of the relationship

The study found that positivity was correlated most strongly to relationship satisfaction and control mutuality and assurances were correlated most strongly to commitment, suggesting that each strategy has a slightly different function in supporting relationship quality.

In another approach to understanding relationship satisfaction, Gottman developed a causal process model that shows the different attitudes and decisions that satisfied and dissatisfied partners take.¹¹⁰ For example, he shows how negative message behaviour like sarcasm and accusations lead to instability. Conversely, the ratio of positive to negative messaging was found to be an indicator of stability. The study goes on to find that the attributions that partners make about their partners' negative behaviour also lead to greater or less stability. Partners in stable relationships would be more likely to explain negative behaviour, like being late, with a benign reason, such as their partner being stressed. On the other hand, partners in unstable relationships would be more likely to explain the behaviour with a negative reason, such as their partner being self-centred and rude. When these hostile explanations are put in place, it leads to distancing between partners. Using co-operative messages and

avoiding negative reciprocity would support relationship stability.

While the specifics of couple interactions have no place in policy discussions, the positive impact of social networks, family support and shared parenting on relationship stability may have implications for better supporting parents.

Conclusion

The strength and stability of relationships at home have an enormous impact on parents' well-being and effectiveness. Relationships between parents and children change quickly over time, as children age or parents change their approach. Additionally, the variability of children's temperaments and behaviour – some of which are shaped before birth – have a great influence on how parents deal with and manage their children. These variables often lead to inconsistency in parenting style and in the case of siblings this can lead to conflict and feelings of unfair treatment. Changes in parenting over time should be taken into account when considering how and when to provide support to parents. Children's differential susceptibility to good and bad care can be a huge predictor of their outcomes and more must be done to identify this.

The nature of the family structure affects parenting from a different angle. On a macro level, there are some important differences between single parents, cohabiting couples and married couples. However, most research shows that micro-level processes are responsible for shaping the quality of relationships. Having a supportive, loving relationship is a huge support for parents. However, relationships high in conflict can have such a negative effect on both parents and children that divorce or separation can be the best option. Relationship breakdown should therefore be viewed as something to manage not avoid. Additionally, support for couples should be offered before problems arise to prevent breakdown rather than alleviate problems after they start. Policy makers should pay particular attention to the key transition point of the birth of a first child when considering the time of interventions.

5 Social networks and community

There is a strong body of evidence providing accounts of the external factors that can influence child outcomes: from school and teacher quality, to peers, advertising and cultural norms. The extent to which the media – music, films, television and more recently internet content – impacts young people's behaviour is a debate which has already raged for several decades and will no doubt continue for several decades more.

What is less discussed, and less a matter of political and policy focus, is the extent to which external factors influence parenting. Instead, the act of parenting is often considered in isolation from even their most immediate surroundings – the local environment and neighbourhood context. Alternatively, parents are seen as a means of neutralising any negative external impacts on their children. Here, parenting is most often considered as oppositional to the world outside, fighting to maintain an untouched, unaffected direct parent–child relationship.

In reality, external factors can influence parenting in much the same way they influence every other aspect of everyday lives. They can set the context for parents' positive or negative behaviour and affect how parents mediate (that is transfer) or moderate (serve to change) the impacts of external structures and processes on their children. Understanding these processes in greater detail will help policy makers to create better conditions and environments for parents, and hence support them better.

In this chapter we consider three sets of external conditions: the local environment and in particular the presence of crime and disorder, access to friends and social networks, and the level of collective efficacy in a community. For each, we set out the extent to which they have the capacity to influence parenting, for good or for bad, and outline the conditions under which parenting can act as a mediator or moderator of any positive or negative impacts they may have on child outcomes.

The state of the neighbourhood

A number of studies have focused on the relationship between structural disadvantage of an area, parental behaviour and child outcomes.¹¹¹ There is clearly a link between factors of disadvantage – particularly poverty and levels of parental educational attainment and aspirations – with child outcomes. Poverty, and the related stress it can cause, can similarly impact parenting style by decreasing mental well-being and disrupting family practices.¹¹²

However, studies have shown that although there is some correlation between neighbourhood disadvantage and child outcomes, families can produce positive child outcomes in difficult neighbourhoods. To a large extent, the family is the mechanism through which disadvantage affects children and, during the early years and where structural disadvantage is concerned, there is evidence that the family can act as a buffer and qualify negative impacts. In this section, we focus primarily on one of the major parental concerns of negative community influences – the presence of crime and disorder in the area – and consider the extent to which, and the circumstances within which, parents can act as an effective protective force. We also consider the extent to which formal services, as opposed to informal social networks, can assist parents in their attempts to control and limit external negative influences.

Fear of crime

In Demos' ethnographic research, families described attempts to shield young people from what they perceived to be bad influences in the area. Alongside more established concerns around drugs and gang related violence, parents argued that other problems such as bullying and abuse in and around local estates were perceived by the authorities to be trivial, while in fact they created a huge amount of worry and stress. Parents repeatedly emphasised the difficulties in controlling external forces and the extent to which this could lead to conflict and disruption within the household. For example, Brendon regularly left the house and wandered around the estate without telling his parents where he was going. Brendon's parents, particularly his mother, were constantly shouting for him from their front gate or going off to the local park to try to find him. Steve and Jennifer's concern about drugs and gangs often exacerbated their fear and frustration when Brendon ran away, leading to conflict and disruptiveness.

This conflict and stress, born out of a feeling of being out of control and unable to temper negative influences in the community, were common among some parents in Demos' study. In some cases, parents felt it was impossible to control that external influence: 'It's not the parents fault, sometimes you can't do anything' (Hannah, 2 August 2010).

Parents and children described how they adapted their daily routines to compensate for a perceived lack of safety in the area. For example, Shareen and Sabir employed various strategies to ensure their children were safe. These included keeping in touch with them by mobile phone during the walk home from school and picking the girls up from school as often as possible. Ultimately, the main resource parents drew on was the ability to restrict young people's movements – not allowing children to go out at night until they were 18.

To help cope with the additional demands and stress placed on them, parents relied heavily on interventions originating from local schools, including advice from parent–teacher liaison meetings about behaviour issues and parental stress management. Parents also accessed a range of local and community facilities, such as libraries, parks and leisure facilities. For example, Humera explained that there were a number of safe activities which she could do with her children in the local area, including using libraries and parks, and finding new interesting shops to explore. She felt that it was merely about 'making the effort' in order to access them together. Humera's family was an exception in our study, as the majority of parents did not access many community services because of anxiety or fear.

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Evidence on crime and parenting in the UK

The UK has the highest rate of youth offending among European Union (EU) countries. We are also more scared of young people than our European neighbours.¹¹³

Recent analysis shows that family and household circumstances are likely to contribute to young people offending. For example, children with parents who are themselves offenders are more likely to commit crime. Beyond this, poor relations with parents, not spending much time with parents, disorder in the local area and lack of adult supervision all contribute to the likelihood of young people offending.¹¹⁴ Specifically, poor relations between parents and their children are related to levels of disorder and criminal activity in the local area.

The contextual sources of stress and support have been shown to be an important factor influencing parenting behaviour.¹¹⁵ Parents' care-giving priorities are informed by the demands and challenges of the communities in which they live.¹¹⁶ Local level disorder and high crime rates in an area are key contributors to parental stress, concern and worry. In Demos' research, parents emphasised the presence of drugs and crime as key pressures on parenting, because of the threat they posed for children's futures. Their concerns were at their highest at times when children were considered outside parental control, for example when walking to and from school and particularly as children grew older.

This stress can erode parents' well-being and undermine parenting sensibility.¹¹⁷ Much evidence suggests it leads to parental attempts to exert greater control, for example by encouraging parents to become more restrictive and controlling¹¹⁸ and reducing children's autonomy and freedoms as a means of protection.¹¹⁹

This can have positive and negative results. Since children recognise the danger of certain neighbourhoods, they can respond more positively to high levels of restriction imposed on them through punitive parenting than if they were in a safer neighbourhood.¹²⁰ However, Bowen et al suggest this may also have negative consequences: 'By enforcing restrictions on their children's behaviour at a time when youth have a developmental need to seek extra-familial social interactions and independence,

[parents] also increased the likelihood of parent-adolescent conflict.'¹²¹

Maintaining control can be particularly challenging when children reach adolescence and begin making active attempts to carve out space between themselves and their parents. At the point that parental influence wanes, the importance of peer influence begins to grow. However, evidence suggests that parents still mediate the likelihood of making negative peer associations – with the stakes demonstrably higher in disadvantaged areas. Children with nurturing, involved parents are less likely to become involved with negative peer associations than those experiencing harsh, inconsistent parenting – and the positive or negative effects of parenting styles are amplified in most disadvantaged neighbourhoods.¹²²

Parenting control in challenging neighbourhoods

The relationship between a 'bad' area and negative parenting behaviour is not, however, direct or a foregone conclusion. In contrast with other studies, qualitative work conducted in an area of Glasgow experiencing high levels of low income, unemployment and drug misuse saw parents describing parenting styles that were open and democratic, challenging views that parenting problems were rife in areas with high levels of anti-social behaviour by young people.¹²³

The Glasgow study showed that both parents and young people usually identified positive aspects of their local areas, and adapted to the environment, designating safe spaces to go at specific times of the day. A key feature was the presence of familiar and trusted family friends and neighbours, and open communication and trust between parents and children.

Elsewhere in this report, we detail the positive impact parenting interventions can have on parenting behaviour. There is also considerable evidence of the importance for young people on having places to go where they can be safe and engage with peers in a supervised, structured environment.¹²⁴ Each of these elements is crucial for encouraging positive child outcomes.

That neighbourhoods, on a micro-level, can look very

different from what statistics of measuring poverty and disadvantage suggest emphasises the importance of disentangling such facts and figures and nationwide policy concerns (crime rates and levels of drug misuse) from the subjective perceptions and assessments that are key to local area well-being. While the actual presence of crime can undoubtedly have a strong influence on parenting behaviour, an element that is sometimes missed in research is parental perceptions and judgements on the safety of the area. Recent research suggests that concern for safety – fear of crime and concern for children – is an important psychological factor influencing parents' decisions.¹²⁵

In considering how to neutralise the negative impacts of high crime areas, policy makers' approaches arguably need to be subtler than they have been in the past. An approach that embraces asbos and punitive fines for parents, and stimulates fear of young people gathered in local areas is unhelpful in many respects, but does little to improve the prospects for positive parenting. These are not supportive measures likely to improve parents' confidence and sense of control. As will be emphasised elsewhere, a whole community approach is required based on trust, collective efficacy and mutual support.

Friends and social networks

The informal social networks that parents have are extremely important in facilitating their parenting. As opposed to formal support services, they can be flexible, understanding and, importantly, share common values with the parent. The traditional social network on which we expect parents to rely – the extended family – is now commonly supplemented by extended support from friends.

In Demos' ethnographic research, extended family members played a number of important roles in the provision of informal support for parents and children. This was particularly pronounced within some ethnic minority groups. Most often, grandparents were relied on to provide childcare support; however, for some parents the role of extended family went much wider and deeper. For example, Shareen's view was that when a person marries, they marry into the family and that 'you do a lot as a family, you compare strategies and share children's results, talk about education and find out other opinions on what you are doing, or use family to be role models for your children so they can see what they are aiming for in life' (Shareen, 31 July 2010).

But friends were also called on to provide support and assistance. Elaine drew heavily on the support of one particular close friend, Leslie, to help with her children. An arrangement that was at first informal had recently been formalised as social services had agreed to pay Leslie to look after the children once a week. The important factor here was trust – and particularly knowing the children knew and liked Leslie. Some parents employed specific, considered strategies to emphasis formal bonds and trust even within informal social networks, for example, applying terms of family to friends. As Shrijana commented:

You look for the relationship... you use the word which makes the family and shows respect.... If there is a friend around the corner who is older, you will call her 'auntie'. It's a term of respect but it brings them into the family. Shrijana, 14 August 2010

Overall, parents repeatedly emphasised the importance of having more informal opportunities to network and share their thoughts and feelings with other parents. For example, following an informal parents' session at a local park where there were opportunities to meet and chat to other parents, Elaine suggested such events 'make you feel like you are not alone' (Elaine, 30 July 2010). Similarly, Hannah also thought informal support was important, arguing that she 'keeps too much inside' and with no opportunities to talk without her children around it was hard because she 'can't offload or de-stress' (Hannah, 2 August 2010).

Wider research on parenting and social networks

Evidence shows that emotional and social support from families is positively associated with mothers' optimism and family routine. Poor relationships with family can be linked to communication problems between parents and adolescents, which in turn are related to depression among young people.¹²⁶ Support and strong communication across the extended family can also be particularly important in promoting family resilience to shocks, especially illness,¹²⁷ and financial upsets and adversity.¹²⁸

The role of informal social networks

Alongside traditional family structures, the informal social networks parents have are extremely important in facilitating parenting. Supportive social networks can lead to better parenting by directly socialising parents into different parenting styles.¹²⁹ A number of studies, discussed below, have shown that parents who have access to supportive social networks tend to have more nurturing styles of parenting, display more affection, are more responsive and create more stimulating home environments for their children.

Social networks can support improved parenting by providing information and giving parents more confidence. The two most important types of information given are child rearing advice and information about community resources. Riley found that fathers relied on advice about child rearing from members of their social network¹³⁰ while Bowen found that 'in the context of mutual interest and concern, neighbouring parents exchange parenting information, values, strategies and feedback, all of which have been linked to more effective parenting practices'.¹³¹

In addition, a number of studies have found that social networks and support raise parenting style by improving confidence. For example, 'emotional integration or isolation from potential support networks can enhance or diminish mothers' self evaluations of their competence and satisfaction in parenting'.¹³²

A UK study by Waylen and Stewart-Brown showed that changes in levels of parents' social support had a strong effect on parenting across several domains, including the provision of warmth and support, and the ability to stay in control and discipline effectively.¹³³ Importantly, the net effect to parenting style is greater when a parent experiences a decrease in social support rather than an increase. This suggests two things: that the maintenance of social support for parents, in the form of emotional, financial and practical support from one's partner, family and friends, is extremely important, and the resilience of parents when some or all of this support is withdrawn is particularly fragile. It may also suggest diminishing returns to increases in social networks.

If the latter is true, it suggests a differential impact depending on when and where social support is available. Evidence shows that timing of social support is of particular importance. For example, if support is available at a time when parents are under stress (for example, at the time of birth) then parents are much more likely to develop a positive parenting style. Several studies have shown that social support in the first three months is a high predictor of positive attachment style. Support during the early years can make the most impact.

But beyond this, it is quality not quantity that is important. Though the size of one's social network can make some difference, to focus on it is misleading. Research shows that the main factor that affects parenting style is the quality and quantity of support that the network provides.

Recent advances in technology may nuance this finding somewhat, particularly in relation to the growing popularity of online support sites such as Mumsnet. Although the majority of evidence continues to show that the quality of technologically assisted social networks is less important than that of 'real life' support, there is a growing body of research that points to the ability of web-based support forums to neutralise some feelings of loneliness and isolation.¹³⁴ In particular, such sites can play an important role in providing information and advice especially in situations where people may be embarrassed to ask or access this face to face.

In general, social networks can help to improve parenting indirectly by improving the mental health of parents, particularly through the stressful period of transition to parenthood. Social networks can reduce stress by buffering against threatening events and reducing likelihood of depression.¹³⁵ Strong, supportive social networks can be very important for those who are otherwise in relatively isolated positions: Thompson and Peebles-Wilkins found that teenage mothers particularly benefited from higher levels of psychological well-being resulting from supportive social networks.¹³⁶ Their mental health, facilitated by these networks, provided emotional space to parent well and give emotionally to their children.

However, supportive social networks are not always positive. At times, they can bring conflict and stress to parents and families. Indeed, social relations that are supportive yet also full of conflict can have a negative effect on parenting styles: Le Goff et al found that 'interfering networks make parent–child disagreements and parental worries increase'. It is also important that a couple's networks are balanced. If one caregiver in a couple has more supportive networks than the other, both their parenting styles tend to be worse.¹³⁷

Collective efficacy

Collective efficacy is a measure of the extent to which people in a neighbourhood trust each other and are able to exert informal social control, based on accounts given by residents themselves. A collectively efficacious community is one in which the residents share values, trust each other and are willing and prepared to intervene for the public good, for example with adults monitoring and correcting the behaviour of children who are not their own.

Collective efficacy, then, measures the likelihood of informal support being available while also describing the atmosphere of the neighbourhood as a whole. If high collective efficacy is characterised by communal trust alongside informal control then it could be argued to be the community level correlate of authoritative parenting, the style that combines warmth and affection with control and discipline.

Collective efficacy can have a direct impact on child outcomes. Studies in the past have shown strong correlations between collective efficacy and reduced rates of crime and delinquency, particularly among young adults.¹³⁸ Furthermore, collective efficacy, just like authoritative parenting, discourages affiliation with deviant peers – a significant contributing factor in the formation of delinquent behaviour.¹³⁹ Supportive control, whoever it comes from, seems to act as a deterrent to anti-social behaviour and an encouragement to positive child outcomes in most situations.

There is even evidence that neighbourhood facts can override parenting factors in some instances: for example, a study by the Institute for Public Policy Research showed that poor parenting in a good neighbourhood did not have a negative effect.¹⁴⁰ However, in a number of areas, the effects of collective efficacy are either fully or partly mediated through parenting.¹⁴¹

The relationship between positive collective efficacy, positive parenting and children's outcomes is not a linear, uncomplicated one. Nonetheless, it is important to recognise and understand the relationship between the two when considering how best to support parents.

Community approach to parenting

Demos' ethnographic study drew out the importance of the presence of adults in the community to 'keep an eye' on children and provide some notion of 'community parenting'. For example, Steve explained that other people on his estate 'kept an eye' on Brendon and would come and find him if they saw Brendon talking to people he shouldn't. In return, Steve said he played a role in parenting other people's children, looking out for them, giving advice and sharing his son's toys with them.

Some children also commented they had a sense of the community being involved in parenting; they felt that a collective view on 'good' behaviour influenced their actions. One child noted, 'If you meet important people or if you're on a train or a bus you should be well behaved, otherwise you could shame your parents.'

Where parents perceived a lack of collective efficacy, concerns about neighbourhood safety were amplified. For

example, Ronald complained that in the UK it was impossible to draw on the extended support he could access in Ghana.

The idea of community parenting was also subject to cultural differences. For example, Iris explained that she felt it was much harder being a parent in the UK as she cannot parent her children how she wants, particularly when it comes to discipline. In Ghana, her neighbours would take this responsibility alongside her, and would punish and regulate children according to what was expected parenting behaviour in her culture, a culture she felt was vastly different from that in the UK.

Cultural differences and fears over safety of parents had the potential to harm collective efficacy through parents' desire to keep children separate from their communities. For example, different cultural approaches to parenting caused concern for some parents. For example, while Humera felt it was important that her children interacted with and learnt about families from other parts of the world, she wanted greater support from families with religious and lifestyle attitudes that conformed to her own.

Similarly, some parents whose children were in classes with many children for whom English was a second language felt this impacted on their child's performance at school, as pupils were not streamed in lessons according to their language ability. Some parents had higher aspirations, which they felt to be out of sync with other people in the local community; this led some of them to take steps to remove their children from local influences, for example by attempting to leave the area or placing them in private schools.

The influence of collective efficacy on parenting

Several studies have found that collective efficacy can improve parenting style.¹⁴² It seems obvious that this would be the case. Other adults in communities with high levels of collective efficacy may influence parenting style in various ways. For example:

- They may directly cause embarrassment or annoyance to the parent of the child by raising issues of concern with them – particularly around the disciplinary aspect of their parenting, frequently the main deficiency in parenting quality.¹⁴³ This increases social pressure on parents to adopt an authoritative parenting style.
- They may provide opportunities for parents to see other adults respond in positive ways to their children, and indirectly teach them to parent better.
- Collectively efficacious communities are more likely to provide peer networks that can give informal emotional or instrumental support.¹⁴⁴

As well as providing a positive influence, collective efficacy can amplify the effects of positive parenting. Although research suggests the possibility that the children of families parenting well in spite of a difficult neighbourhood can turn out just as well as any other,¹⁴⁵ this evidence is largely based against the backdrop of structural disadvantage. There is strong evidence that collective efficacy – a measure not of the kind of families who live in a neighbourhood, but of the social interactions between community members – can explain neighbourhood differences in the effects of positive parenting attributes.¹⁴⁶

For example, in communities with low levels of collective efficacy, a change in levels of authoritative parenting from low to high was associated with a decrease in the number of deviant peers of 28 per cent. However, in communities high in collective efficacy the same change in levels of authoritative parenting produced a much greater effect on deviant peers: a change of 45.7 per cent.¹⁴⁷ This same effect could be observed with levels of delinquency: in communities low in collective efficacy, a change from high to low authoritative parenting was associated with a reduction in delinquency of 34.5 per cent. In communities high in collective efficacy, this same change brought about a much greater reduction of 56.5 per cent.

While collective efficacy can have a positive impact on parenting, parenting style has little impact on collective efficacy

as a whole.¹⁴⁸ Building collective efficacy is not as simple as engaging parents to improve parenting style – it must be a community wide initiative that can take into account the specific requirements of the local area.

Conclusion

Debates about community or external influences on parenting and child outcomes have tended to make two lazy assumptions:

- that 'good' parents can battle and overcome negative influences, and 'bad' parents do the opposite
- that 'good' or 'bad' areas, where parenting and childhood are concerned, can be explained in terms of structural disadvantage: the level of crime committed in the neighbourhood, the persistence of poverty or wealth and the socio-economic status of residents.

Clearly, the situation in the real world is more complex. Good parents can battle and overcome negative influences, but communities can also help – in some circumstances they can overcome the effects of negative parenting.

Likewise, the negative influences that can have the most impact are not those we most commonly read in news headlines designed to shock and illustrate the extent of 'broken Britain', but those which are less immediately obvious and contained in the social processes within a neighbourhood. It is relationships, not structures, which have primary importance in this instance.

These findings will have implications for the development and delivery of parenting support services. It is likely the most effective community orientated interventions will be those that can generate feelings of control and confidence for parents. This kind of approach should also be more able to reflect the needs of a particular community, which are likely to differ according to a wide range of factors.

For it is the presence of collective efficacy within communities which will be most successful in supporting positive parenting styles, overcoming other parental concerns in relation to crime and fears of lacking control, and amplifying their effect to achieve positive child outcomes. The key lies in creating the right conditions that communities can build on: resources, institutions and social norms that can positively influence the ecosystems in which children, parents and communities interact.

6 Financial resources

Low income is often considered synonymous with bad parenting. Indeed, much analysis documents the negative impact of financial pressures on parenting confidence and efficacy, and on child well-being. However, while there is a close relationship between financial hardship and reduced parental effectiveness, the relationship is still complex. Part of the impact is straightforward, in limiting a parent's ability to buy things for their children and to provide the elements of an easy childhood. But the way in which financial pressures impact on relationships in the home, increase stress and depression, and contribute to a more erratic and anxious parenting style are less well explored.

Financial pressure on parents

There were several different reasons why the families in our study were struggling financially. In a number of families, neither of the parents was employed and the family depended on state benefits. For Kate and Marco, this meant that each week was a struggle to survive, juggling the payment of bills with the need to buy food and provide for the family's needs. At the time of the research neither Kate nor Marco worked. Kate could not work because she cared for her grandmother practically full time. Marco was Jamaican and was living in the UK although his visa had run out. The officials knew about this, and he 'reported in' every two weeks, but this meant he was not eligible to gain employment until the visa issues were resolved. He explained that ever since he was a young boy, he has contributed to his family as his dad left the home when he was a baby. He felt angry and frustrated that he was unable to work and can't contribute to the family income. Kate collected £170 every two weeks, and told us that the middle of the second week was a stressful and worrying period spent wondering how they would

support themselves until they could pick up the next round of benefits.

In three families from our ethnographic study, parents talked about the challenges of supporting their families from a single salary. Humera's husband worked locally in the NHS, but because they had five young children aged between 3 and 12 years, Humera was unable to find work, despite being educated to degree level herself. Shareen worked as a child-minder, and her husband, Sabir, could not work full time because of his health problems, which have continued since having a kidney transplant some ten years ago. Simon explained that 'all the pressures are financial', and talked about the pressures on working parents who do not earn enough, or struggle to earn enough to survive. Both Humera and Simon explained that in their London borough, the system was 'set up' so that all financial support was targeted at parents who were not working, and Simon explicitly stated that 'it's annoying that you are better off if you don't work – some people are on \pounds_{30} K just on benefits alone' (Simon, 15 August 2010).

Elaine, from one of our high needs families, said that state support was a real help but in many cases was still 'not enough' (Elaine, 30 July 2010). Elaine and Jason's children have complex needs, behavioural problems and learning disabilities. Elaine often felt that although she was struggling to make ends meet she had to fight for additional support, for example in getting social services to pay a family friend of hers for providing respite care.

Trends in financial well-being

According to the latest available survey data, up to 3.9 million, or 30.3 per cent, of children in the UK live in relative poverty.¹⁴⁹ The incidence of relative poverty in the UK has fluctuated since 1996/7, with periods of decline (particularly in the late 1990s) and expansion (including three consecutive increases between 2005 and 2008). Interestingly, despite incorporating the first full financial year of the recent financial downturn, the child poverty rate in the latest year of survey data (2008/09) fell by 0.8 per

cent. Despite this decline in the latest survey data, the long-term objective of the previous government to halve child poverty by 2010 will not be achieved.

An important dimension of this child poverty data is the increasing incidence of parents facing the double pressures of work and poverty. Gottfried and Lawton have found that the percentage of children living in households where a parent works, yet the household remains below the poverty line, has increased from 50 per cent in 2005/06 to 61 per cent in 2008/09.¹⁵⁰ As a result, there are now 1.7 million children living in households experiencing in-work poverty. Although the problem of in-work poverty has been increasing for at least a decade, Gottfried and Lawton show the potential for the recent economic downturn and the increasingly flexible UK workplace to combine to have a particularly significant effect on the working poor. While reduced hours and pay freezes may have helped people to avoid redundancies, these arrangements also have the potential to exacerbate the economic vulnerability of the working poor. Although these recession driven effects have not manifested themselves in the latest data, it is worth noting that all of the observed reduction in child poverty during 2008/09 occurred in workless households; the level of in-work child poverty remained unchanged during this period. As a result there are now substantially more children living in households experiencing in-work poverty (1.7 million) than in workless families experiencing poverty (1.1 million).

The effect of low income on parenting style

There is extensive evidence that financial stress undermines parenting and contributes to a more disordered and anxious parenting style. It is very likely that the strain of parenting under financial stress and insecurity makes it more difficult for parents from low-income backgrounds to display a consistent approach to discipline and boundary-setting than for parents from higherincome backgrounds. Further analysis of Lexmond and Reeves' *Building Character* finds that certain aspects of parenting style are associated with household income.¹⁵¹ Although levels of

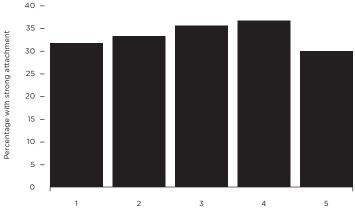


Figure 3 High levels of parent-child attachment by income quintile

Income quintile (1 is lowest, 5 is highest)

parent-child attachment are distributed regularly across economic groups (figure 3), consistent rule-setting is associated with wealthier families, indicating that lower income families are either struggling to maintain consistency and rule enforcement in their home environment or that they place less importance on consistency as important for children (figure 4).

Other research comparing financial circumstances with parenting in general has found that increases and decreases in financial circumstances seem to have little effect on parenting overall. For example, one study found that mothers with no financial difficulties at 8 months achieved an average parenting score of 28.3 compared with a score of 27.2 by those with many financial difficulties. Where financial circumstances worsened over time, the parenting score decreased for 54.9 per cent of mothers and increased for 31.2 per cent. Where financial circumstances improved over time the parenting score for mothers increased for 37.7 per cent of mothers but decreased for 42.7 per cent. These are outcomes for which it is impossible to draw a conclusion.

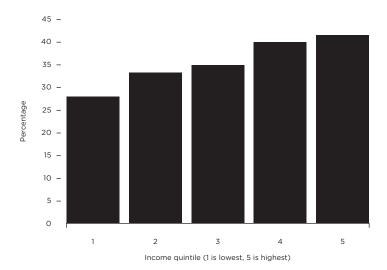


Figure 4 Consistent rule enforcement by income quintile

There are possible explanations for the contradictory data. One concerns the increase and decrease in financial circumstances. There is most likely an absolute level of income below which income begins to have a negative effect on parenting – for example being able to afford decent accommodation, food and services. However, once a family is above that level, increases or decreases in their income or wealth levels may not have such a great effect. The other explanation is that 'parenting quality' is a composite measure. Good parenting typically combines warmth and responsiveness as well as consistency and boundaries. As figures 3 and 4 show, income is correlated with one but not both of these qualities, so depending on the way parenting is measured, different results will occur. The next section explores these explanations in more detail.

Impact of lack of space on parenting

One of the main ways in which financial pressures affected families was in the quality of their living arrangements. A lack of space at home impacted on parents and children in two main ways. First, parents said that homes can become pressurised when there are too many people living in too small a place. Space was an issue for Ronald as the family's flat was small, sparsely decorated and rather dark. The sense of being 'shut away' was emphasised by the fact that Ronald locked the front door even when the family was in the house, saying 'you never know [what might happen]' (Ronald, 27 July 2010). Ronald paid £850 per month for the two-bed flat but said he wanted to move to a three-bed house with a garden, as there is insufficient enough room to accommodate his family, which included his brother Benji, who had recently moved to the UK from Ghana. Since Benji moved in, Ronald's son Ryan had been sleeping on a bed placed in the living room. Marco and Kate also spoke of a lack of space, saying that unnecessary or avoidable tensions arise because of the pressure that builds up because they have insufficient time away from the children, as a couple and individually.

A key issue highlighted by other families was their dependency on council housing, or houses provided by housing associations, and the frustration that their ability to move house is dependent on other houses coming free locally or in other areas. Elaine felt angry about where she lived as she felt the house was too small for a family with four children and another on the way, although it had four bedrooms. The main problem, however, was that it was expensive to heat. She complained repeatedly to social services, and, as our case studies came to an end, she explained that they are finally moving the family to a house in south London. Humera also talked about her house being too small. Her five daughters shared two rooms and she and her husband had the third bedroom. She explained that her family is thinking of moving to the north Kent area, but they felt a bit trapped in the London borough because such a move depended on a housing association or council house becoming free in north Kent. Humera was, therefore, frustrated because she could not control this situation and didn't have a choice in where she lived

The second way in which lack of space affected families living in small homes on estates was that noise is easily transferred between homes, which makes living at home more difficult. Elaine explained that she has noisy neighbours upstairs who can often be heard yelling and screaming at their children.

Living in close proximity to neighbours also has an impact on parenting approaches. Kate and Marco explained that they constantly worry that if their children are upset or throw a tantrum, a neighbour might hear what is going on and report them to the social services. This actually happened in between the two case study days. It was very easy to hear what was going on above and either side of the flat as the walls were thin and the flats so small and close to each other. Kate and Marco said that the tight space influenced their parenting style: in order to keep the children happy and quiet and avoid getting into trouble, they decided to parent them in a way that was not always how they would have behaved in different circumstances. For example, to solve arguments and tears at night, Kate said that the children often slept with her in the double bed, while Marco slept in one of the single beds in the children's room because it was easier to calm them down by letting them get what they wanted. Kate and Marco were aware that they needed to be stricter and tougher with their children, especially when they were younger. They also realised that their approach to parenting was the reason for Skye's clinginess and their children's tendency to throw tantrums to get what they wanted.

Effect of household chaos on parenting style

Crowded, noisy home environments with little regularity or routine is termed 'household chaos' in the academic literature.¹⁵² Household chaos is associated with parents and caregivers who are less responsive, less involved, less vocally stimulating and more likely to interfere with children's exploration. Also, household chaos has been shown to be associated with caregivers who are more likely to use physical punishment and discipline inconsistently.¹⁵³ This trend has been observed in both mothers and fathers, with the effects being passed on to children: children reared in chaotic home environments tend to display lower levels of social competence and higher levels of problem behaviour.¹⁵⁴ While these child outcomes have been correlated to poor parenting, the effect of household chaos has been found to predict children's behaviour directly, rather than indirectly through changes in parenting. All of these factors place additional stress on parents themselves, which has a negative effect on their parenting style: organisation and routine has been linked to reduced stress and higher well-being in adults.¹⁵⁵

Also, importantly, relations between measures of household chaos and family demographics are either low or nonsignificant.¹⁵⁶ Furthermore, Dumas et al recently concluded that household chaos is a useful construct in itself and is not simply a proxy for adverse social or psychological factors.¹⁵⁷ In other words, it could be a useful tool for identifying parents in need of support in addition to more traditional indicators such as income.

This implies that a disorganised, loud and chaotic home environment is a risk factor in and of itself and can be alleviated through alternative means to more traditional parenting interventions, such as through housing policy or through improving the quality of public space. Parental education focusing on improving household organisation and routine could also be a useful and concrete route to more effective parenting.

Finance and buying power

There are various explanations for the role of finance in parental confidence and efficacy. More affluent parents are more likely to be able to afford access to services that are associated with better outcomes, for example, positive social activities. Margo et al show how trends in parental spending on activities for children increased in the last ten years in middle class families, creating a socialisation divide with poorer families unable to offer their children the same quality of structured sport, art or drama and music based activities.¹⁵⁸ This impacts on capabilities since the study showed that participating in particular activities affected

the development of social and emotional skills including application, locus of control and empathy.

Our case study families illustrate this concern well. Humera explained that her youngest daughter had been offered a place in the nursery at the local primary school. However, because of the costs involved, which amount to £40 per week, they were unlikely to be able to afford it. This meant that Humera would be unable to go back to work. A number of families explained that there was insufficient money available to be able to entertain the children at weekends, and especially during the school holidays. Parents felt that they are not meeting their children's expectations and were letting them down as a result. However, Humera did comment, in contrast to most other families, that there were a number of free activities which she could take part in with her children and that it was all about 'making the effort' to find them. These include using libraries and parks, and finding interesting new roads of shops to explore, or historical sites.

Although families struggled, it is important to note that families did find ways to cope with limited resources. As well as finding free entertainment within the local area, Shareen and Sabir were very careful with their money, and budgeted well. They wanted their children to have what they did not, especially a good education, hence their efforts to ensure there was money each week for their children's private tuition. They occasionally cancelled the tutor to save a bit of money for something particular, like a holiday, but made compromises in other areas, including shopping in cheaper supermarkets.

Conclusion

Child poverty remains stubbornly high in the UK. While poverty puts pressure on parents by restricting the types of provisions, services and accommodation that parents can afford, financial pressure also negatively impacts on parenting style, creating stress and more erratic, inconsistent parenting. Although benefits and welfare are lifting workless households out of poverty, those in in-work poverty are seeing little change, and the number of those in in-work poverty exceeds that of workless impoverished households. The policy response required to alleviate these problems exceeds the scope of this report. However, our findings show that making work pay will have important, positive implications for parents.

The effects of financial pressure also impact on the quality of the home environment. Household chaos has a negative effect on both parental style and children's behaviour. Although household chaos is not explicitly linked to socio-economic status, there are clear connections between poor quality or cramped housing and lower income families. Household chaos may be a good additional indicator of parents in need of greater support besides standard indicators like income. New interventions could also be developed with the aim of reducing household chaos through encouraging routine and organisation.

7 Work

As the division of labour has changed both at work and at home so parents' roles have become more complex and harder to negotiate. Long-term economic shifts have resulted in it being a necessity for both parents to work in most families, or alternatively households where a single parent shoulders the burden of both working and caring. Parental responsibilities can no longer be divided sharply between work and childcare – either the parental role is shared or mothers undertake a 'double-shift'.

Evidence from chapter 4 on couple relationships shows that couples who share responsibilities of parenting successfully together and approach parenting as a united team are happier and more effective. For modern families, coming to shared parenting arrangements where both partners (with the aid of extended social networks) can create a shared parenting model is key to delivering the best outcomes for children.

Pressures on parents' time

If you take parents who are full-time working... it becomes challenging if you have to divide your time. If you don't work, you can't support your children but if you don't support them as parents, your child could be at harm. You are either a full-time parent or a full-time worker. It is very difficult if you are a single parent. If you come back from working for 12 hours or 10 hours and come home, you're tired. You might want to withdraw from the child and put the child away. That has some implications in the future, and you regret not spending the time with the family.

Parent, focus group discussion, 7 July 2010

The pressures of balancing being a parent 24 hours a day, 7 days a week, with the responsibilities of earning an income were

often discussed by parents in the ethnographic study. Those in this situation found it difficult to balance time out of the home with time in the home with family. Ronald and Simon both said they had insufficient time with their families and struggled to juggle family commitments with work and, in the case of Ronald, education. Simon had two jobs and worked six days per week; Ronald had been combining his studies at university with a parttime job for six years.

Being a parent to difficult children was also tiring. Over the course of the day Hannah became visibly more tired. This did not result in her getting more angry or impatient with Afia, she simply became less interested and less attentive in dealing with her. This had the effect of making Mia increasingly responsible for her younger sister. As Hannah's ability to deal with Afia's disruptive behaviour lessened throughout the day, Mia stepped up to fill her mother's shoes, responding to Afia's demands for a drink or a snack and disciplining her when she was naughty. Hannah also said she had to stay up late each night after Afia had gone to bed so she could prepare food for the following day and get some time with her older daughter and for herself. However, this noticeably impacted on her attentiveness as a parent and the nature of her interactions with her daughters during the day.

Trends in parental employment

The most significant changes to patterns of parental employment relate to women's participation in the labour market. Since the 1950s there has been a large increase in female employment, a shift which has been particularly pronounced for mothers. The number of mothers who work has more than tripled from one mother in six in 1951 to four in six by 2008.¹⁵⁹ This increase has occurred at a steady rate of around 11 per cent per decade since the 1950s. The average employment rate for all mothers has increased, but certain groups of mothers are significantly more likely to work than others.¹⁶⁰

The age of children is a key predictor of maternal working status: mothers with a child aged under 5 are far less likely to be

in employment. This trend is especially pronounced for lone mothers, of whom only 35 per cent work, compared with 63 per cent of mothers in a couple. However, once the children of lone mothers reach compulsory school age, these mothers are significantly more likely to enter the labour force. Indeed, since the mid-1990s the biggest increase in employment has been for lone mothers with children aged under 11. This is largely accounted for by increases in employment among mothers with children aged between 5 and 11. In 2008 the difference between lone and couple mothers' employment was only 11 per cent once their children were aged over 11, compared with 28 per cent when their children were under 5. Mothers with partners who have children under 5 have increased their employment significantly since the mid-1990s whereas partnered mothers with older children have not significantly increased their employment.¹⁶¹

Over the last few decades there has been a significant shift in the effect of motherhood on female employment: between 1980 and 2000 women became significantly less likely to move to lower status work after the birth of their first child. (However, this trend is less pronounced for women who are out of the workforce for a longer period of time, or return to work part time.)¹⁶²

Trends in paternal employment and use of flexible working have also been noted. The most recent analysis of fathers' working hours and flexibility shows that around a third of fathers are taking advantage of options such as flexitime and working from home. In the past few decades fathers increasingly have flexible work hours, although there has been little change in the types of flexible options they use. Fathers make more use of flexitime and home working today than non-fathers.

Working hours

While the percentage of UK residents working more than 48 hours has declined from 22 per cent in 1999 to 18 per cent in 2008, many of those who do work long hours are parents, with 30 per cent of fathers and 6 per cent of mothers working more than 48 hours per week. Some parents work even longer hours,

with 12 per cent of fathers and 3 per cent of mothers working more than 60 hours per week.¹⁶³

It is less and less common for mothers to stay at home full time; today the two most common arrangements for mothers are full-time work and part-time work.¹⁶⁴ Mothers in a couple are more likely to favour part-time work (41 per cent) over full-time work (31 per cent). This pattern is not the same for lone mothers who are just as likely to work full time (28 per cent) as they are to work part time (27 per cent).

In recent years there has been a considerable increase in the number of hours worked by mothers. In 2008 mothers who were married or cohabitating were 24 per cent more likely to work full time than in 1996, with one in three (31 per cent) working full time, compared with one in four (25 per cent) previously. The hours worked by lone mothers full time and part time have also increased dramatically. By 2008 lone mothers were 23 per cent more likely to work full time than in 1996, with just over one in four (27 per cent) previously. By 2008 lone mothers were 27 per cent more likely to be working part time than in 1996, with just over two in seven (28 per cent) working part time compared with just over two in ten (22 per cent) previously.¹⁶⁵

A recent Department for Business Innovation and Skills (BIS) report on working hours shows there are important differences between fathers' working hours and non-fathers' working hours.¹⁶⁶ The average number of weekly hours worked by full-time employed fathers in a couple is higher than that of men in full-time employment without children. While a third of fathers regularly work over 48 hours a week, under a quarter of men without children work these hours. The most important predictors of long working hours for men are occupational status followed closely by fatherhood status. Men who are professionals or managers tend to work longer hours than those with another occupational status. After this, fatherhood has now become an important predictor of working longer hours, even after controlling for age, earnings, partner's work status and education. Finally, fathers increase their working hours, on average, after their youngest child reaches 6 years of age. This

shows that although fathers are working longer hours than nonfathers, fatherhood and age of children are having a growing impact on working-hour decisions.

Macro trends in the time parents spent with children

There is some evidence that parents working longer hours has not led to them spending less time overall with their children. According to some surveys parents are spending more time on child-rearing activities than in recent history, with working mothers claiming to spend more time with their children now than non-working mothers did in 1981.¹⁶⁷ In fact, according to this study the total time parents spend with their children per day has trebled since 1972. This trend is explained by the finding that parents are apparently sacrificing leisure time to spend more time with their offspring¹⁶⁸ and that, within the home, parents are able to spend more time with their children as a result of the increased use of 'time-saving devices' such as disposable nappies, dishwashers and washing machines.¹⁶⁹

Despite this evidence, the amount of time parents spend with children is still very limited: according to the Office for National Statistics' Time Use Survey in 2005, mothers were spending an average of 32 minutes a day with their children, and a further 35 minutes with children as a 'secondary activity'. Meanwhile, fathers were spending just 15 minutes a day, and 10 further minutes while doing something else. This is an increase compared with 2000, when mothers spent 28 minutes one on one with children and fathers just 11 minutes.¹⁷⁰

In a separate Time Use Survey documenting how older children (aged over 16) spend their time, the Office for National Statistics found that parents who work full-time spend just 19 minutes every day 'caring for [their] own children'. A further 16 minutes is spent looking after their children as a 'secondary activity' (while doing something else).¹⁷¹ There is also evidence that family mealtimes (which are sometimes used as a proxy for quality time) are in decline. Analysis of the British Household Panel Survey and Youth Trends surveys suggest that in 2006, 72 per cent of teenagers reported eating a family meal with parents more than once a week, compared with 83 per cent in 1986.¹⁷² Most parents also say that they would like to spend more time with their children if work permitted it; one survey found that only 6 per cent of mothers wanted to work full time.¹⁷³

Parental division of labour and the rise of the 'double shift'

It's an atmosphere, never stopping. I am always doing things in the house – washing, cooking, tidying-up all of the time. Most of the time I'm wondering when I'll be finished. I have very messy children – you tidy up and then everything is upside down again. Cooking 24 hours a day. Coming back from work and then starting again, it never stops.

Mother, focus group discussion, 7 July 2010

The primary research for this project once again highlighted the existence of the double shift for many (although certainly not all) mothers struggling to cope with the pressures of combining a paid job and running a home. This reflects a wealth of other studies exposing the disproportionate burden of domestic labour carried by mothers. A previous Demos report termed the phenomenon 'the other glass ceiling' because of the limiting effect it had on mothers who:

take greater responsibility for looking after children, managing the household, maintaining social networks of extended family or friends. The significance of this – the other glass ceiling – risks being lost in the familiarity of the assertion. Noting that women still do the double shift is almost a truism. Yet what it represents is no less significant than the barriers to advancement women continue to experience in the workplace.¹⁷⁴

So, while British public attitudes about women's role in society have changed significantly, it seems that the division of labour in private has not kept pace. The 24th report *British Social Attitudes* finds that nearly eight in ten people (77 per cent) with partners say that the woman usually or always does the laundry, a similar proportion to that found in 1994 (81 per cent). The most liberal division of labour is found among couples where the woman works full time, earns more than her partner or has a partner who does not work. There is also some evidence that this inequality goes unacknowledged or discussed – men and women disagree when it comes to saying how much of the housework they do. Two-thirds of women (68 per cent) say that in their relationship they usually or always do the cleaning – but only 54 per cent of men say this of their partner.¹⁷⁵

The role that unequal distributions of paid and unpaid work (whether this impacts on men or women) plays in generating family conflict should not be underestimated. Commenting on the findings of *British Social Attitudes*, Professor Rosemary Crompton argued:

People's attitudes towards gender roles have clearly changed, but their behaviour lags behind. This is important – a gap between a person's views about gender roles and what actually happens in their own home seems to lead to greater stress at home, for women at least. The women least likely to find their home life stressful are those who have liberal views about gender and who share domestic tasks with their partner.¹⁷⁶

Quality of work: autonomy and choice

In addition to the impact that work has on parents through diminishing time spent with their children, research suggests that not just the quantity but also the quality of one's work has a major effect on parenting.

Parcel and Menaghan¹⁷⁷ and Rogers, Parcel and Menaghan¹⁷⁸ reported significant correlations between the amount of selfdirection involved in a mother's job and a composite measure of maternal warmth, maternal cognitive stimulation and the quality of the home environment. Whitbeck et al also found that mothers with more mundane and less flexible occupations provide less appropriate and less stimulating home environments than those whose work is more complex; similarly, fathers whose work is more autonomous and self-directing are more likely to practise a more adaptive, flexible and authoritative parenting style, encouraging more autonomy and self-control in their adolescent children.¹⁷⁹ Whitbeck et al demonstrate that parents' working conditions have as much effect, if not more, on their parenting skills as their level of education does.¹⁸⁰ Again, the amount of self-direction in the workplace is a key variable; a father's sense of 'being his own boss' is associated with effective forms of punishment, and with his child's sense of mastery. O'Neil and Greenberger go even further, arguing that there is no correlation between parenting skills and educational background, while there is a correlation between parenting and work conditions.¹⁸¹

Flexibility in work

Research by Greenberger and Goldberg has shown that stressful, inflexible jobs that demand long hours also undermine a positive, high-quality parenting style. The best parenting – which we have noted is warm and responsive but with firm discipline – also requires the most time and energy. As a result, Greenberger and Goldberg note, time shortages, scheduling problems and parental distress stemming from work–family incompatibilities may reduce parents' opportunities and abilities to engage in high-quality parenting styles.¹⁸²

There are several elements of inflexible jobs that seem to undermine authoritative parenting, one of which is stressfulness. As early as 1963, LW Hoffman found that working mothers whose jobs were not overly stressful displayed more affection and used less severe discipline with their children, a connection confirmed in 1979 by Piotrkowski.¹⁸³

More recently, Rena Repetti has demonstrated in two papers that short-term daily job stress is associated with parents' emotional withdrawal from their children. In a study in 1994 of air-traffic controllers who were fathers of young children, she showed that low visibility at the airport or high traffic volume – objective measures of a more demanding, stressful day for the controllers – were associated with these fathers' withdrawal from their children (for example, they had fewer high-level interactions such as helping with homework, fewer disciplinary efforts, and less favourable feelings about interacting with their children).¹⁸⁴ These conclusions are replicated for mothers in a later study.¹⁸⁵ Repetti suggests that withdrawal of behavioural and emotional involvement may be an adaptive response that allows parents who are experiencing too much stress on the job to regain a more normal level of emotional and physiological functioning.

Interestingly, though, this second study found that mothers' self-reported withdrawal from their children on highstress work days was greater than that reported by outside observers. This suggests that an inflexible, stressful job damages parents' confidence in their own parenting ability, and the mothers' self-perception of their own withdrawal from their children seems to be greater than the reality as seen by an impartial outsider.

Indeed, parents seem to be intuitively aware of the connection between stress, flexible working and confidence. In a survey commissioned by the Government Equalities Office, almost two-fifths (39 per cent) of working parents believed that being able to work flexibly would make them less stressed, and over half (51 per cent) believed that their relationship with their children would improve if they could work flexibly.¹⁸⁶ In a more recent study, Sarah Beth Estes found that where flexible work practices are in place, mothers 'almost universally perceived that policy use enhanced their abilities to attend to family responsibilities'.¹⁸⁷

Conclusion

Our working lives are inextricably bound up with our home lives, and the ability of parents to support their children will be shaped by their freedom to balance care with their responsibilities in the workplace. But work does not have a straightforward relationship with parenting. It is not only number of hours worked, but also the flexibility of a parent's schedule and the quality of their work that impacts on parenting style and effectiveness. Questions of autonomy and job satisfaction may be as relevant as the length of the working day.

The changes to working patterns, particularly for mothers, have given rise to more complex gender roles in the home.

Although there may be a growing acceptance of shared parenting as an ideal, the reality still falls far short. With the division of labour still so inequitable for many couples, and with support for fathers still lacking in parenting services, policy makers may have to take more radical steps to make shared parenting a reality.

Section 3 Supporting parents: policy priorities and gaps in service

The Labour government saw parents as key agents in improving children's life chances and reflected this in policy through both providing more support to parents and charging them with greater responsibilities. They put supporting parents at the heart of family policy through the development of the Sure Start infrastructure and setting up the National Academy of Parenting Practitioners to train a workforce of parenting practitioners.¹⁸⁸ Labour also assigned new responsibilities to parents through placing them at the centre of their respect strategy for reducing anti-social behaviour. The development of family intervention projects in 50 different local authorities not only provided intensive support for parents but also introduced sanctions aimed at improving the behaviour of anti-social families.¹⁸⁹

Since coming to power in 2010, the coalition government has maintained much of the previous government's stance on parenting, with additional emphasis on the importance of stable couple relationships. The coalition's new policy priorities are also shaped by their ambitious deficit reduction plan, which requires significant cuts to public services. Notably, early years' provision has been singled out along with the NHS and schools as a key area that will be prioritised by the coalition in the interests of 'long term prosperity and fairness'.¹⁹⁰ In reconciling these positions, the coalition government has articulated three key priorities for supporting parents:

- · targeting support at disadvantaged parents
- · building a 'big society' to support parents
- · supporting stable relationships and shared parenting

In some areas, clear policies have already been articulated. In others the government is currently involved in consultation before developing new policies. A number of government reviews are in progress to inform this process including Frank Field MP's review on poverty and life chances, Professor Eileen Munro's review of child protection, Dame Clare Tickell's review of the Early Years Foundation Stage and the Graham Allen review of early intervention. A ministerial Childhood and Families Task Force, chaired by the Prime Minister, has been set up to 'identify and prioritise... policy proposals that will make the biggest difference to children and families'.¹⁹¹

This section will evaluate the policies and policy directions set out by the coalition government so far in the context of previous policy approaches by the Labour government and some examples of current approaches to supporting parents in the form of case studies.

8 Targeting support at disadvantaged parents

This chapter will outline coalition government policies that are focused on targeting support towards more disadvantaged families. It will then evaluate these measures, exploring in more detail what broader infrastructure and service reforms are required to provide a context that can ensure vulnerable families are effectively identified and supported.

Coalition policies Welfare reform

The adoption of a more targeted approach to welfare provision is at the centre of the coalition government's efforts to combine support for families with their commitment to reduce public spending by £32 billion by 2014/15.¹⁹² In the 2010 spending review it was announced that from April 2013 families with a higher rate taxpayer (those with one or more adult earning over the higher rate tax threshold currently at £43,875) would no longer be eligible for child benefit.¹⁹³ This withdrawal of child benefit for higher rate taxpayers is expected to affect around one in six, or 1.2 million, families with children.¹⁹⁴ The rate at which child benefit is paid will also be frozen for three years from 2011.¹⁹⁵

The coalition government has framed the decision to cut child benefit for higher earners as a measure that will improve social justice as well as save approximately £2.5 billion per year: 'by withdrawing Child Benefit from families with a higher rate taxpayer... people on lower incomes are not subsiding those who are better off'.¹⁹⁶ However, a number of commentators, including Mike Brewer and James Browne from the Institute for Fiscal Studies, have argued that this policy is inequitable as it will unfairly penalise single earner couples or lone parent households, where the earning person's income is just above the threshold: 'a one-earner couple with an income of £45,000 would lose all their child benefit, but a much better-off couple where each has an income of £40,000 would keep all their child benefit'.¹⁹⁷

The coalition government asserts that this means-tested approach to child benefit will enable it to take action on reducing child poverty, as it will use some of the funds saved from withdrawing child benefit from higher earners to fund an increase in the child tax credit; this will be worth an extra £180 in 2011/12 and a further £110 on top of this in 2012/13 (increasing child tax credit by a total of £290 in 2013).¹⁹⁸ The coalition argues that this 'will ensure the Spending Review will have no measurable impact on child poverty in the next two years', as the increase in the child tax credit will provide additional resources to lone parents and low income families.¹⁹⁹

The childcare element of the working tax credit will also decrease from April 2011, with the percentage of childcare costs that parents will be able to claim reduced from its current rate of 80 per cent to 70 per cent, a return to 2006 levels. This is expected to save £385 million a year by 2014/15.200 However, it is important to note that this measure may be partly offset by the announcement that from 2013/14 disadvantaged 2-year-old children will be eligible for 15 hours per week of free childcare.201 To qualify for the working tax credit, couples will also be required to increase their working hours to 24 hours per week (the threshold currently is 16 hours). This represents the harderedged side to the coalition's welfare policies; while the increase in child tax credit demonstrates that the coalition is concerned with supporting low income families, the increase in the number of working hours required to qualify for working tax credit sends the message that parents are expected to become more selfsufficient.

The coalition's particular take on fairness means that the aim of targeting support towards disadvantaged families will be tempered by a concern to promote 'work and personal responsibility'; there will be clear limits to the amount of financial support that non-working families can expect to receive. The spending review introduced new measures to ensure that nonworking families should not be better off than working families: 'the amount a workless household can receive in benefits [will be capped] to no more than an average family gets by going out to work'.²⁰² The planned reforms to housing benefit reflect the same concern; in the June 2010 budget the coalition announced that the amount of local housing allowance that families can expect to receive will be capped according to property size.²⁰³ This is to address the perceived problem that overly generous housing benefits are too expensive to the state, 'damage work incentives' and are unfair to working families who could not afford to live in comparable properties.²⁰⁴ However, this is likely to result in significant disruption for many families who may be forced to move out of their area to a cheaper property.

The coalition also plans to implement a new universal credit from 2013 that will aim to reduce the financial barriers that many people face in moving into work.²⁰⁵ Under these plans, the new universal credit will bring together out-of-work benefits, housing benefit and tax credits, simplifying the way that these benefits are administered and aiming to ensure that benefits are reduced more gradually as an individual's earnings increase, so that people do not find themselves financially worse off as a result of getting a job. If successful, these plans should also help to address in-work poverty, so that working in relatively low-paid jobs becomes financially viable for more families.

To increase work incentives, the reforms introduced by the universal credit will also introduce greater conditionality. This conditionality will not apply to those who have a health condition or disability that makes them unable to work, carers, lone parents or 'lead carers' who have a child under 1 year old.²⁰⁶ Everybody else will have a 'claimant commitment' outlining the requirements they must fulfill, such as preparing for work or seeking work. Those who do not meet the requirements – which are gradated according to individual circumstances – will have their benefits cut.²⁰⁷ This is intended to send the clear message that benefits are not an automatic entitlement, and that they confer obligations on their recipients.

Refocusing Sure Start and expanding health visiting

In July 2010 Children's and Families Minister Sarah Teather announced in a speech that the coalition government is committed to 'refocusing Sure Start, ring-fencing its budget for this year and introducing extra health visitors, dedicated to helping the most disadvantaged families'.²⁰⁸ It is planned that the number of health visitors will increase by 4,200 (about a 50 per cent increase on current numbers) to facilitate better early intervention in supporting families.²⁰⁹

The move to 'refocus' Sure Start was described in the spending review as 'targeting early intervention on families who need the most support' and returning Sure Start to 'its original purpose of improving the life chances of disadvantaged children'.²¹⁰ However, it is not yet clear how 'disadvantage' will be assessed and whether it will be based on parents' income, on the geographical area where they live or on whether they have personal circumstances that can make a family more vulnerable, for example, if a parent has mental health problems or is struggling to manage their child's behaviour. Sure Start outreach services will also be cut to pay for the increase in Sure Start health visitors.²¹¹ The potential implications of reducing outreach services for disadvantaged families' engagement with Sure Start will be discussed in the analysis below.

The Family Nurse Partnership

In October 2010 Health Secretary Andrew Lansley announced that the coalition will double the number of disadvantaged families who have access to the evidence-based Family Nurse Partnership health visiting programme, so that an additional 6,000 families can benefit from the programme by 2015.²¹² The Family Nurse Partnership is a highly intensive home visiting programme that provides 'vulnerable' first-time mothers with 50 visits by a specially trained nurse from the antenatal period until the child is 2 years old. The visits are focused on improving the mother's health in pregnancy, and supporting the child's health and development by improving parenting and access to healthcare. International evaluations have demonstrated high success rates, with key outcomes including:

- · fewer subsequent pregnancies
- · increased maternal employment
- · higher cognitive performance among children
- · better social behaviour by children in pre-school years
- fewer arrests of children when they reach adolescence²¹³

The evaluation of early pilots of the Family Nurse Partnership programme in the UK between 2007 and 2009 has shown similarly encouraging results, including reductions in mothers smoking, increases in breast-feeding, improved parent-child interaction and couple relationships.²¹⁴

This decision to increase investment in the Family Nurse Partnership for first-time mothers who require extra support is tangible evidence of the coalition's commitment to targeting support at more disadvantaged parents. However, the success of this approach will depend on vulnerable mothers being identified early in pregnancy or soon after their child's birth. Therefore, it will be important that the Family Nurse Partnership is not viewed as a stand-alone intervention but as part of a spectrum of support services, with close links to universal services such as GPs, health visitors and children's centres which can identify vulnerable parents early on and refer them to this more intensive intervention.

Towards a holistic infrastructure for supporting parents

Welfare reform

The coalition has clearly attempted to mitigate the impact of its welfare reforms on low income families by introducing meanstesting for child benefit and increasing child tax credit, which is a universal benefit for families. The plans to introduce a new universal credit also aim to reduce disincentives to work and inwork poverty by ensuring that benefits are withdrawn more gradually as the family's income increases. However, the coalition's decision to increase the minimum number of hours that couples with children must work in a week to qualify for working tax credit and reducing the percentage of childcare costs that parents can claim back may create financial difficulties for parents who are already struggling to combine their caring responsibilities with work. Freezing child benefit for three years will also impact more on the finances of poorer families than other families, as their benefit is likely to represent a greater proportion of their income.

The cuts to benefits that are currently on offer to new and expectant mothers will also have a greater impact on poorer families. The health in pregnancy grant, a non-means tested payment of £190 to women who are 25 weeks pregnant, will be cut from January 2011.215 This is surprising given the government's awareness expressed in the public health white paper that by 'improving maternal health, we could give our children a better start in life, reduce infant mortality and the numbers of low birth-weight babies'.²¹⁶ A more fair and consistent approach might have been to means-test this benefit rather than abolishing it. The baby element of child tax credit is also to be cut from 2011/12: families with babies under the age of 1 will be £545 poorer per year as a result.²¹⁷ From April 2011 the Sure Start maternity grant, which is worth £500 for parents on certain benefits, will also be restricted to each couple's first child, whereas previously a payment was made for each new baby.²¹⁸ These cuts focusing on the maternity period and soon after a child's birth could add to the stress of having a new baby and are particularly worrying given that the period around the birth of a first child is a particularly vulnerable time for couple relationships, and the most common starting point of relationship breakdown.

The coalition's stated aim of directing resources towards disadvantaged families is at risk of being undermined by a programme of cuts which will impact negatively on lower income parents. These cuts to the welfare budget are also taking place against a backdrop of broader cuts to public services, on which many vulnerable families are likely to rely. The unknown quantity is the possible impact of the introduction of the universal credit. The government claims this will lift many families out of poverty in the decade ahead by reducing the financial barriers to working. However, it also represents a radical overhaul of the way that the state supports parents both in and out of work. It will be important that the new conditionality measures are combined with support for parents who are low in confidence and have been out of work for a long time, to prepare themselves for employment.

Refocusing Sure Start on the most disadvantaged

The coalition government's decision to refocus Sure Start on the most disadvantaged, and reduce funding for outreach services, must be evaluated in the context of the evidence on Sure Start's performance in engaging 'hard to reach' families to date. Sure Start Local Programmes (SSLPs) were first set up in 1999 to provide support to parents and deliver early years services specifically in disadvantaged areas. Following an evaluation of Sure Start in 2005, which showed some improvements in outcomes for children from less disadvantaged backgrounds, but worse outcomes for children from the most disadvantaged backgrounds,²¹⁹ SSLPs began to be restructured into a more consistent, universal set of children's centres that were placed under local authority control. The most recent national evaluation of SSLPs, in 2008, demonstrated they had had a more positive impact on child outcomes, finding that children living in SSLP areas had better health outcomes, experienced lower levels of problematic parenting, had a higher quality home learning environment, were more likely to be accessing services, and showed more positive social behaviour.220 Unlike the 2005 evaluation, it found no adverse effects for children from the most disadvantaged backgrounds. In fact, this later study found that the positive effects of the SSLPs noted above 'appeared generalisable across population sub-groups', including workless households, teenage parents and lone parents.221

If Sure Start seems to be getting better at reaching more disadvantaged families in the context of a universal service, how then can Sure Start be 'refocused' on disadvantaged families in a way that doesn't alienate or exclude those who need support? First, there are important questions to answer about what a more targeted approach to the provision of Sure Start services might mean. In particular, how is targeting to be applied? The options for 'refocusing Sure Start on the most disadvantaged' include:

- · area-based targeting
- income-based targeting
- · need-based targeting

Area-based targeting provided the initial rationale for locating the first SSLPs in the most disadvantaged areas in England. However, this approach clearly runs the risk of compounding the inequalities already experienced by families living in 'pockets of deprivation' within more affluent communities and is not the most effective way to focus services on vulnerable parents and children.

Income-based targeting is also problematic as it poses the risk of making services appear stigmatised and unattractive to low-income parents.²²² The effect of stigmatisation could reduce the reach of Sure Start and require more funds to be invested in relatively time intensive outreach activities. Income-based targeting may also present the problem that parents and children who might have benefited from services on offer at Sure Start, but do not meet income-based targeting criteria, may be missed.²²³ For example, incidences of post-natal depression, which is known to impact negatively on children's social and emotional development, are not confined to low-income mothers but occur 'across the income spectrum'.²²⁴

Unlike the previous two examples, needs-based targeting directs resources towards families who require extra support regardless of their background, thus avoiding arbitrary cut-off points based on income or postcode. However, needs-based targeting can be more complex to perform and requires practitioners to be trained in conducting assessments so that they can correctly identify children and parents with additional support needs. For practitioners to make such assessments they must also already be in contact with families, therefore needs-based targeting can only be effective if it is conducted in the context of 'light touch' universal services that are able to engage families across the social spectrum.²²⁵ To refocus Sure Start on this basis

it might be necessary to provide a core offer of services that remained universal, for example, health-focused services and informal services that promote social mixing and building social networks, such as breastfeeding cafés and Stay and Play activities, while more resource-intensive services such as evidence-based parenting programmes could be targeted on the basis of assessed need. Recommendations on how parents and children could be more effectively screened to assess their support needs will be explored in the final chapter.

Cutting Sure Start outreach services

As observed above, the coalition's programme for government indicated that they would fund an increase in the number of health visitors by cutting the funding available for Sure Start outreach services. This is difficult to justify as the national evaluation of Sure Start has emphasised the importance of targeted outreach and home visiting as a means of improving parental engagement among vulnerable or socially excluded groups.²²⁶ An evaluation published in 2006 identified good practice in SSLPs that used home visiting as 'a first step' towards engaging parents to take part in services outside the home. The study also noted that it requires 'persistence' to ensure that those families who could most benefit from Sure Start services do take them up.227 Trying to refocus Sure Start on more disadvantaged families while also cutting outreach is therefore likely to be ineffective, as struggling families will miss out on the support that they need to engage with the service in the first place. If health visitors are to take over this outreach role, they must also take on the responsibility for supporting vulnerable families to build a trusting relationship with their local children's centre. If this support is not provided, there is a risk that the most vulnerable families will fail to access Sure Start services.²²⁸

Increasing the number of health visitors

The coalition government is right to focus on the dwindling numbers of health visitors as a significant problem for the effective delivery of early intervention services. Health visiting has a very broad reach and is a popular service among parents; in a 2007 survey by YouGov, 76 per cent of parents said that they would like to receive parenting support and advice about their child's health and development from a trained health visitor with up-to-date knowledge.²²⁹ More than four in five (83 per cent) of parents of children under age 5 said that they wanted to receive this help in their own home, compared with smaller numbers who wanted to receive it in children's centres (41 per cent) or doctor's surgeries (39 per cent).²³⁰ Their trusted status means that health visitors are well placed to perform a number of important preventative functions (see box 2).

However, despite the importance of health visiting as a universal service, and its prominence in government strategies such as the Healthy Child Programme,²³¹ recent NHS workforce statistics show that the numbers of full-time health visitors in England fell by 292 between 2007 and 2008 and by a further 245 between 2008 and 2009, leaving a total full-time health visiting workforce of 8,519 staff, 1,642 fewer health visitors than were employed in 1999.²³²

This decline in staff numbers has led to unsustainably high caseloads; in 2008 57 per cent of health visitors had a caseload of at least 400 children and 20 per cent were responsible for more than 1,000 children.²³³ Guidelines issued by the Community Practioners and Health Visitors Association recommend health visitors should have a caseload of no more than 250 families for an effective universal health visiting service. However, in December 2008, one survey found that only 15 of the 139 primary care trusts that responded were successfully meeting this target.²³⁴ Even more alarmingly, in evidence cited at a House of Commons Health Committee meeting in 2009, 60 per cent of areas surveyed only offered a restricted service of one visit after the birth of a baby and 69 per cent of health visitors felt they no longer had sufficient resources to meet the needs of the most vulnerable children.²³⁵

Box 2 The role of a universal health visiting service The role of a universal health visiting service is:

- to identify and offer support to vulnerable families after the birth of a child
- to provide early diagnosis and support for mothers suffering from post-natal depression or domestic violence and making referrals to specialist services
- to provide support for post-natal depression, attachment problems and relationship difficulties, improving mental health for parents and children
- to provide parenting support and preventative health advice before and after a child's birth
- to link parents into local early years services (eg Sure Start children's centres)
- · to support breast feeding and healthy eating
- to provide general advice for parents facing other difficulties (eg housing or financial difficulties) related to having a new child²³⁶

However, while some of these problems will be assuaged by an increase in health visitor numbers, a simple increase in staffing will not be enough on its own if health visiting is to be effective as a preventative universal service. Health visitors' training also needs to be improved to better meet the needs of parents and young children. In the survey mentioned above, many parents complained that health visitors gave advice that was out of date or contradictory, and that they didn't pay enough attention to fathers.²³⁷ According to recent research, health visitors do not receive enough specialist training in meeting the needs of new parents and very young children, particularly regarding child development in the early years, and its importance for children's later life outcomes.²³⁸

Other research indicates that health visitors are still unsure of their role in children's centres, and of how they are expected to work alongside other early years practitioners. Policy emphasis on 'integrated frontline services' has not necessarily translated into joined-up working on the ground.²³⁹ This is problematic given the apparent expectation by the government that health visitors will take a lead role in engaging vulnerable families in early years and parent support services. The 2006 evaluation of outreach and home visiting services in SSLPs stressed the importance of ensuring that health visiting was well integrated with outreach and home visiting activities to avoid duplication and ensure that a shared approach to supporting parents was taken.²⁴⁰ Improving integrated working between health visitors and Sure Start practitioners should, therefore, be a high priority.

The announcement in the Department of Health's July 2010 white paper that the power to commission local health services is to be devolved from primary care trusts to GP consortia is likely to lead to significant changes to local working practices. However, the Conservative party's public health green paper published in January 2010 specified that the additional 4,200 health visitors it intends to recruit would be based at Sure Start children's centres rather than GP surgeries,²⁴¹ and recent comments by Health Secretary Andrew Lansley have confirmed that health visitors will be 'allied to Sure Start' rather than being under the control of GP consortia.242 Therefore, these structural changes should not impact negatively on the working relationship between health visitors and Sure Start practitioners. This co-location of health visitors and Sure Start practitioners is an important step towards more integrated working practices but will not guarantee effective multi-agency working on its own. It is also important to note that if health visiting is to become more closely associated with Sure Start than with GP surgeries, strong referral routes between health visitors and primary health services must also be maintained.

Case study 1 illustrates an innovative family support service based in Wigan. This service works in partnership with the local health visiting service to assess the needs of all new parents and their children and link them into appropriate local support services.

Case study 1 - Leigh, Lowton and Golborne family service Demos visited the Leigh, Lowton and Golborne family service in September 2010. The aim of the service is:

- to provide children with the best possible start in life
- to provide parents with the positive support they need to be effective parents
- to identify, at an early stage, children with limited development and address these issues effectively and successfully

The Leigh, Lowton and Golborne family service was put together with the support of a collective of local schools: the Leigh Excellence Cluster of Schools and Lowton and Golborne Schools (LOGOS). The service arose in response to the shared concerns of local headteachers about the low developmental level at which a growing number of children were entering their primary schools. This included children unable to speak properly, children with challenging behaviour and even children still in nappies aged 4+.

This group of 26 primary school headteachers came together, in partnership with children's and young people's services and health services, to embrace shared responsibility for children aged 0 to 4. They spent two years developing the service, which is match-funded by the Leigh Excellence Cluster and Sure Start.

Family partners

The family service has 12 'family partners' who each maintain an onsite presence in at least two different schools and work with several different children's centres. The family partners' role is focused on meeting the developmental needs of 0 to 4 year olds, and they spend most of their time providing community-based support and making outreach visits to families in the surrounding area.

Making contact

The family service has an agreement with the primary care trust that every health visitor who makes a first visit to a family will take a leaflet and registration form for the family service with them. This is the process:

- The health visitor asks parents to sign a consent form giving the family service their permission to make contact.
- The health visitor also identifies whether the family might have additional support needs and then relays this information to the family service.
- If the family has no additional support needs, the family service arranges for a children's centre link worker to make contact with the family.
- Families who may have additional support needs (including any parent who has concerns about their children's behaviour) are contacted by a family partner to arrange an initial visit.
- At the initial visit the family partner makes a full assessment of the family's support needs.

A clear division of labour has been agreed to avoid role confusion: health visitors address families' medical needs, Sure Start link workers help parents to access universal services and family partners address families' social needs.

Providing support

The universal reach of the family service, through its partnership with the health visiting service, is very significant to its success in identifying vulnerable families who were previously out of reach of services. In a high proportion of the family partners' cases, no other agency was in contact with the family, therefore many families' support needs were previously undetected. Family partners act as key workers, both providing support directly and helping families to access other services. The family partners' working methods include:

- providing targeted home-based support focusing on the care giver's behaviour through the use of an evidence-based child interaction programme
- delivering play-based activities in children's centres to help parents understand how children learn through play; how they

can support their child's learning and development; and the importance of communication, language, literacy and social and emotional development

- delivering evidence-based parenting programmes in local children's centres
- referring families to specialist services such as speech and language therapy or mental health support

Family partners work hard to gain the parents' trust at the outset, as parents are often reluctant to discuss their problems with an unfamiliar person. Interventions by family partners are open-ended and have no particular time limit, although most families receive support for around ten weeks. Each case is reviewed three months after the intervention finished to check that everything is OK and see if any further support is needed.

Training

All family partners have a degree or equivalent qualification in a relevant field and have previous experience working with families and children in the 0-5 age range. Each family partner undertakes a six-week induction programme and receives training in:

- · comprehensive child development
- safeguarding and risk assessment procedures
- working with families and coordinating agencies
- evidence-based parenting programmes such as learning through play and Triple P

Managing data

Data held by the primary care trust is confidential, therefore the family service manages its own database. A health professional is seconded to work with the family service to make sure staff have a full picture of each family and any special needs they may have.

The family service manages a central database, storing a record of each child known to the family service using

SharePoint (a collaborative working tool that can be accessed using a web browser). Identified partners may access information from this database where appropriate, facilitating multi-agency working.

The family service has also developed a sharing of information protocol with the health visiting service.

Impact

Between January 2010 and September 2010 the family service:

- engaged with 1,021 children
- · carried out 2,868 visits to homes and families
- supported 307 children with their social needs (eg lack of ageappropriate interaction with others)
- signposted 88 per cent of children and their families to other partner services as part of the support package provided
- provided direct one-to-one support to 61 per cent of families visited by a family partner

As a result of the service, professionals from a range of other services including the health visiting service, family courts and social care are now also using the evidence-based Triple P parenting programme as part of their support packages.

Future aims

In 2011 it is planned that the service will investigate how it could become more targeted, while still maintaining its 'progressive universal' character, as it is felt that the current service model will no longer be sustainable in the context of budget cuts.

9 Building a 'big society' to support parents

In a speech in October 2010, Children and Families Minister Sarah Teather emphasised the integral role of families in the coalition's vision for the big society; both as active participants in the big society and as recipients of its support.²⁴³ She critiqued the previous government's approach to supporting parents and families as being 'relentless[ly] top-down' and for making people feel that 'services [were] done to them', and that they weren't being listened to, and articulated the coalition government's 'big society' vision for better supporting parents and families. This includes the following key themes:

- · devolving power from central to local government
- increasing the role of the community and voluntary sector in supporting families
- · building families' informal support networks244

The following sections will outline key policies that the coalition government has articulated before evaluating the 'big society' approach to supporting parents. Selected case studies of community and voluntary sector services will be presented, providing examples of innovative ways to support parents in improving their emotional well-being; building social networks; giving and receiving support informally; and becoming more involved in their communities.

Coalition policies

Devolving power from central to local government

The coalition government's policy document 'Building the big society', published in May 2010, made a commitment to 'promote the radical devolution of power and greater financial autonomy to local government, including a full review of local government finance'.²⁴⁵ Soon after the coalition government came to power, it announced a Decentralisation and Localism Bill, which would devolve more powers to councils and give communities control over planning decisions and local facilities.²⁴⁶ The Department for Education Business Plan for 2011–15, published in November 2010, describes how these changes will improve service delivery, arguing that for 'too long citizens have been treated as passive recipients of centralised, standardised services', and outlines plans to give local authorities much greater decision-making power over how they invest their resources to tackle local problems.²⁴⁷ The early intervention grants and community budgets announced in the 2010 spending review are key examples of this decentralising approach.

Early intervention grants

The purpose of the early intervention grant is to provide local authorities with greater flexibility in how to allocate funds to support children and young people from disadvantaged backgrounds. From 2011/12, the ring-fencing of all revenue funding streams will end (except for schools and the new public health grant), and the number of individual grants to councils will reduce from around 90 to fewer than 10, including a non-ring-fenced early intervention grant.²⁴⁸ Rather than providing local authorities with separate grants to tackle issues such as teenage pregnancy, alcohol misuse, young people at risk of becoming NEET, anti-social behaviour and poor parenting, as the previous government did, the early intervention grant will enable local authorities to identify their own local priorities.²⁴⁹ The funding of Sure Start services will be included in this grant.²⁵⁰

In response to this announcement, Graham Allen MP, who is chairing the government's early intervention review, commended the emphasis that the government was placing on early intervention, saying this set a 'good precedent'.²⁵¹ However, he stressed that as the grant is not ring-fenced, it is important that local authorities do use this funding to invest in early intervention, which is specifically defined by the review's terms of reference as 'programmes which ensure that babies, children, and young people build a strong bedrock of social and emotional capabilities to fulfill their potential and help break intergenerational transfers of disadvantage and underachievement'.²⁵² However, it is not yet clear what expectations and reporting requirements will be attached to the early intervention grants; the implications of this more laissez-faire approach will be discussed in more details in the analysis below.

Community budgets

From April 2011, community budgets will be piloted in 16 local areas, which include 28 different councils.²⁵³ The budgets will bring together various different central government funding streams into a single pool for tackling the range of problems experienced by families with multiple needs. This approach is intended to streamline the sources of funding that are allocated to support the estimated 120,000 families with complex needs, which the government estimates to add up to about £8 billion per year. The intention is that community budgets will also 'give communities more power to target spending on key local priorities, despite the reductions in spending'.²⁵⁴ If this pilot is successful, the intention is that community budgets will be rolled out nationally by 2013/14.

The community budgets concept clearly builds on the 'Think Family' approach that the Labour government developed through its family intervention projects and Family Pathfinder projects. The Family Pathfinder Programme allowed each local authority to develop its own approach to providing intensive support for 'families at risk'.²⁵⁵ A recently published evaluation analysing the impact of this programme on the first 216 families who received support has found a number of positive outcomes including:

- nearly half of the families involved showed reduced levels of need when they left the programme
- the risk of family violence had decreased by an average of 70 per cent across all of the families

- the number of families affected by lack of support networks, debt and housing instability was reduced to almost half
- the number of people engaged in offending and anti-social behaviour had reduced by 50 per cent
- the number of children and young people with school attendance issues had reduced by half.²⁵⁶

Given the evident success of this localised, 'whole family' approach to improving outcomes for vulnerable families with complex needs, it is encouraging that the coalition is to build on this approach with its community budget pathfinders.

Increasing the role of the community and voluntary sector in service delivery

In 'Building the Big Society', the coalition pledged to increase the involvement of the voluntary and community sector in running public services through the following measures:

- supporting the creation of mutuals, co-operatives, charities and social enterprises and encouraging these groups to have much greater involvement in the running of public services
- giving public sector workers a new right to form employee-owned co-operatives and to bid to take over the services they deliver
- using funds from dormant bank accounts to establish a Big Society Bank, which will provide new finance for neighbourhood groups, charities, social enterprises and other non-governmental bodies²⁵⁷

The purpose of these changes is to promote innovation in service delivery by giving front-line workers the autonomy that they need to be responsive to local needs, to make improvements to services, and to try new approaches. In August 2010 the government announced a 'first wave of Pathfinder mutuals', which would investigate what types of support new mutuals led by public sector workers would need.²⁵⁸

More recently Francis Maude, Minister for the Cabinet Office, has announced that the coalition will establish 'rights to provide' for all public services. This will mean that public sector employers are obliged to agree to appropriate proposals made by front-line workers who wish to set up a mutual and take over the running of their services. According to Maude's statement, proposals will be judged according to their ability to meet 'appropriate guarantees'. These include an expectation of savings for the taxpayer and a commitment to either maintain or improve the quality of provision.²⁵⁹

Sure Start has been identified as a key service area that will be opened up to proposals by staff-led mutuals which feel they could 'do things better'.²⁶⁰ Sarah Teather has confirmed that the Decentralisation and Localism Bill will include a provision enabling voluntary groups to challenge councils to let them take over the running of children's centres.²⁶¹ The DfE's Business Plan explains that, working in partnership with local authorities, the department will make a plan to 'increase voluntary and community sector involvement within Sure Start children's centres, improve accountability arrangements, increase the use of evidence-based interventions, and introduce greater payment by results'.²⁶² This indication that the greater use of voluntary and community sector organisations in running support services for families will be combined with the introduction of new quality assurance measures will be explored in the discussion below.

Building families' informal support networks

The coalition government has made it clear, however, that the 'Big Society' vision for supporting vulnerable families does not hinge only on improving formal services. In fact, the formal support provided by the government is in some ways seen as part of the problem, to the extent that it can 'strip away individual accountability and responsibility'.²⁶³ In the same speech mentioned above, Teather observed that the support given and received through informal networks plays a more important role in 'building resilient families' than services, but that disadvantaged families are most likely to lack these social connections. An important part of the Big Society vision is therefore to help more vulnerable families 'make connections with others' so that they can give and receive informal support, reducing the level of social isolation in their community.²⁶⁴

How the coalition government intends to facilitate this process in practice is not yet clear, although the coalition government's Big Society strategy document has said that the government will introduce measures to encourage people to volunteer and take an active role in their communities. To this end, resources will be identified to 'train a new generation of community organisers and support the creation of neighbourhood groups across the UK, especially in the most deprived areas'.²⁶⁵

The authors of a recently published evaluation of the Labour government's Family Pathfinders initiative noted that some aspects of the 'family focused' approach taken by these projects bears strong similarities to the coalition's Big Society agenda. The approach of developing volunteering opportunities to involve the wider community in supporting vulnerable families is particularly relevant. Nearly half (44 per cent) of the families who exited the Family Pathfinders initiative had lacked support networks on entry to the programme, whereas only 23 per cent of families lacked support networks once they left the intervention.²⁶⁶

Importantly, once supportive personal relationships have formed between families and other members of their community, these are more likely to be sustained over time than professional relationships that are attached to a formal intervention.

Implications of the coalition's 'Big Society' approach to supporting parents

Informal support networks and collective efficacy

The research conducted by Demos, described in chapter 5, has highlighted the crucial importance of informal support networks of extended family and friends to parents' confidence and wellbeing. The parents in our ethnographic research emphasised the importance of having informal opportunities to share their thoughts and feelings with other parents and to offload some of the stresses of being a parent. Demos' parenting poll of over 1,000 parents found that 25 per cent of respondents identified the lack of a wider support network as the biggest emotional obstacle they faced as a parent – a higher proportion than those who said relationship difficulties with a partner was their biggest emotional obstacle (22 per cent of respondents).

The research discussed in chapter 5 demonstrates that supportive social networks can improve parenting by providing information on child-rearing and local community resources and by giving parents more confidence in their parenting abilities. This research suggests that the improved mental health and selfesteem facilitated by supportive social networks gives parents the resilience to parent well and be more emotionally responsive towards their children.

'Community organisers' and 'neighbourhood groups' could play an important role in creating opportunities for parents to build their social networks and work together on community projects, although the detail of these plans needs to be fleshed out. The coalition is also right to emphasise the importance of supporting locally developed solutions to local problems, rather than attempting to design a one-size-fits-all national programme to promote effective parenting at a community level. The case studies in this section have been included to illustrate existing approaches employed by third sector organisations to help parents to build their social networks and access peer support from other parents.

The role of informal versus professional support

However, while informal support networks are clearly very important to parents' well-being, previous research has shown that approaches to supporting vulnerable and socially isolated parents that are purely based on informal support are not always effective in improving that family's outcomes. In 2004 the Joseph Rowntree Foundation conducted an evaluation of Home-Start, an organisation that provides home visiting support from volunteers for families with young children. The study found that while the mothers they interviewed felt the home visiting service had helped relieve their stress and had given them a sense of relief from the pressures they experienced, the mothers who had received the intervention over the course of a year did not have significantly better outcomes than the comparison group which did not receive the intervention.²⁶⁷

For a 'Big Society' approach to supporting parents to be successful in improving children's outcomes, the different roles of informal support and professional support must be clearly understood. Volunteers, friends, family and other members of the community can play an important role in helping families feel more confident and socially connected and providing parents with practical and emotional support, but are no substitute when a more specialist intervention is required. Where parents experience more serious problems such as post-natal depression, or if their parents have attachment problems or significant emotional or behavioural difficulties - all of which are associated with children experiencing poor later life outcomes²⁶⁸ – an intervention by a trained professional may be needed. As Professor Stephen Scott has argued, parenting programmes that are focused on improving parenting ability and addressing children's emotional and behavioural problems 'need to be evidence-based and delivered by skilled practitioners, since less competent therapists often have no effect²⁶⁹

The next section will investigate in more detail how government can promote evidence-based practice in front-line service delivery. Before this, case studies 2 and 3 illustrate two services that seek to improve parents' confidence and self-esteem by building their informal support networks. The service in case study 2 aims to improve parents' mental health through a combination of professional support and informal peer support, while the service in case study 3 focuses on reducing parents' social isolation and building their employability.

Case study 2 – Sure Start children's centres Solihull – Adult Mental Health service

This case study is based on interviews with staff from Action for Children that took place in October 2010. Action for Children manages a network of 11 Sure Start children's centres across the Borough of Solihull. Seven of these children's centres are in the north of Solihull, which is significantly more disadvantaged than the south and has high levels of worklessness.

Action for Children set up a flexible adult mental health service in the north of Solihull to help meet the mental health needs of parents with children under the age of 5. The service is delivered by a community psychiatric nurse employed by Birmingham and Solihull Mental Health Trust and funded by Solihull local authority. The service operates out of the network of seven children's centres, providing individual and groupbased support to parents experiencing mental health problems such as stress, anxiety disorder, antenatal and post-natal depression, low self-esteem and unresolved childhood trauma. The service aims to act preventatively, identifying low-level mental health problems and signposting parents to other agencies where appropriate.

Making contact

Most parents access the mental health service through the children's centres, but referrals are also made by health visitors, social workers, schools, GPs and mainstream mental health services. There are great difficulties involved in ensuring that the service reaches the more vulnerable and socially isolated parents who are most in need of support. To increase uptake of the service the mental health worker attends antenatal classes and encourages parents to make an appointment. The outreach activity undertaken by the adult mental health worker is important to increase parents' awareness of the service. However, this requires a fine balancing act, as while there is a crucial need to raise awareness of the service, devoting resources to it can reduce the time available to deliver direct support.

Providing support

The mental health service provides group-based support in two of the children's centres. These take the form of:

• a drop-in mental health support group called 'Life in Mind', at which parents discuss the stresses of the week, any problems they are experiencing with their children and practical strategies for managing stress and anxiety well-being workshops, which provide a structured five-week course in increasing parents' personal well-being. There is a group assessment in the first session to identify particular issues parents would like help with tackling. The following sessions focus on positive thinking, problem-solving and exercises that enhance well-being. They use strategies based on cognitive behavioural therapy (CBT) that are solution focused and client centred.

These group-based sessions are designed to encourage peer-support between parents and to help parents who feel socially isolated to make new friends with others who live locally. However, it is important to note that there are limitations to this approach, as some people are reluctant to discuss mental health issues in a group session. Although most participants report benefitting from the group work sessions, the programme might not be useful for everyone if not provided alongside other specialist support, for example, preparatory work for people to engage in groups and any ongoing direct support to parents after the group sessions have finished.

The mental health service also provides individual support sessions to parents, including home visits if necessary. However, only one or two sessions will usually be provided with individuals. Once an assessment has been made, the parent will be referred to another service that is appropriate to their level of need. This may include referral to a support group, GP, specialist CBT service, mainstream mental health service, relationship support, or drug and alcohol services.

Case study 3 – Roehampton Sure Start parent involvement service

Family Action provides a parent involvement service at Roehampton Sure Start centre. This includes a weekly parents' forum and a volunteering programme.

Parents' forum

Demos visited the parents' forum in October 2010. This has been running weekly since 2007 and has an established network of parents attending each week. A crèche is provided to support parents to take part in the forum.

Parents told us that the forum enables them to:

- make friends with other parents who live nearby and share their experiences as parents
- · make suggestions about regular activities on offer at Sure Start
- plan events, such as activities for their children during the summer holidays
- · hear about one-off training opportunities
- find out information about services and events coming up
- · get their voices heard about how Sure Start services are run

Some of the parents we spoke to said they took part in the forum because it gave them an opportunity to make suggestions about how activities at the Sure Start centre were run. The parents' forum also clearly had an important social dimension. Parents told us they really valued having the opportunity to meet regularly with other parents in an informal setting. The crèche facility meant that they could socialise and confide in each other without interruption from their children. One mother commented that meeting other parents at the forum reminded her that 'you're not the only one who feels like that'. Another said that 'they tell me I'm not a terrible mum!' One mother said that she had not known many people when they moved to the area and the forum had helped her to get to know other parents.

In addition to the forum, most parents said they had attended parenting classes at the children's centre and found them helpful. One mother who had experienced post-natal depression was referred by her health visitor to the course Strengthening Families at the Sure Start centre. She said that this had been really helpful with managing her son's behaviour because 'it tells you obvious things you can do with children that you wouldn't necessarily think of in the heat of the moment'. She said that taking part in the course reassured her that other people experience the same problems as she does. Since taking part in this evidence-based programme she has attended the parents' forum regularly and is now friends with a number of other mothers who live nearby.

Volunteering programme

The volunteering programme was set up by Family Action to build parents' confidence, provide new opportunities for parents to get involved in their local community and support parents to undertake education and training and build their employability.

When parents initially become involved in the volunteering programme, they have a Criminal Records Bureau (CRB) check and undertake a volunteer preparation course. This training focuses on:

- commitment (eg punctuality and reliability)
- · confidentiality and listening skills
- valuing diversity
- · child protection and safeguarding

Parents then choose a volunteering activity they would like to get involved with and the service arranges this for them. Volunteering activities parents have chosen include working as a classroom assistant, working at the day nursery or crèche, advocacy work, administration and running the parents' forum.

Through becoming involved in the volunteering programme, parents have achieved a number of positive outcomes:

- four parents finding work
- two parents volunteering in the day nursery and studying for an NVQ 3 in childcare
- · two parents trained and working as Home Start volunteers
- three parents completing Personal Best' training, which provides a level 1 qualification in event volunteering and future opportunities to volunteer in the London 2012 Olympic Games

Many parents have gone from taking part in the parents' forum to participating in the volunteering programme and vice versa. In combination, the services provide parents with access to informal support and new friendships, greater involvement in the Sure Start service and their local community, and opportunities to get involved in formal training and to gain work experience.

Improving quality in service delivery

If the coalition is to increase the involvement of mutuals and other voluntary and community sector organisations in delivering early years services it will be important that cost savings are not achieved at the expense of effective practice. As observed above, the coalition has indicated that it intends to combine these reforms with quality-assurance measures including increasing the use of evidence-based interventions and introducing payment-by-results funding models. However, it is unclear how this will be achieved, particularly given that it is committed to funding Sure Start through a non-ring-fenced early intervention grant. A number of studies, which will be explored below, have also shown that the training and resources required to implement evidence-based practice can be difficult to sustain at a local level. If the government is serious about promoting evidence-based practice, it will need to consider what types of support service providers need if they are to overcome the barriers to adopting effective ways of working.

The Labour government developed a number of strategies for promoting evidence-based practice. In 2007 the National Academy of Parenting Practitioners (NAPP) was set up to provide free training in evidence-based parenting programmes for practitioners and conduct new research to test the effectiveness of parenting programmes.²⁷⁰ DCSF also conducted a number of national pilots to explore how parenting programmes could be rolled out on a large scale, what particular factors contributed to the effective delivery of parenting programmes locally, and the cost-effectiveness of these programmes.²⁷¹ The Parenting Early Intervention Pilot (PEIP) conducted between 2006 and 2008 provided training to approximately 1,100 staff in delivering evidence-based parenting programmes; these staff went on to train 3,575 parents.²⁷² The evaluation of the programme found that the courses had been successful in improving parents' well-being, improving parenting style and increasing parents' self-efficacy and satisfaction. There were also statistically significant improvements in parents' perceptions of their children's emotional and behavioural skills.²⁷³

However, the evaluation also highlighted the fact that the local sustainability of the programmes once the PEIP funding stream came to an end was 'a major concern'. Research by the Family and Parenting Institute (FPI) has also highlighted the sustainability issues associated with providing short-term funding streams to incentivise the use of evidence-based parenting programmes. The Institute's survey of 110 local authorities in 2009 found that 45 per cent of respondents were moderately or very concerned about the sustainability of their parent skills training programmes and 37 per cent were moderately or very concerned about the sustainability of their parenting support groups.274 The non-ring-fenced approach of the coalition's early intervention grant could help solve this problem with sustainability if local authorities use this funding to embed evidence-based practice into their staff training and day-to-day working methods. However, there is a risk that this money may be diverted to other types of service altogether or may be spent on ineffective parenting support provision. Research by Professor Stephen Scott, the former Director of Research and Development at NAPP, found that while there are more than 150 different parenting programmes currently in use in England, less than 10 per cent of them have robust evidence of their effectiveness.275

The fact that we still do not have enough knowledge about what works in improving parents' and children's outcomes is a key problem that has been identified in Demos' previous work in this area.²⁷⁶ The coalition government is keen to support local innovation and this can be an important way of identifying what is successful in improving parents' and children's outcomes if innovative services are robustly evaluated. However, the UK, unlike the USA and Australia, does not have a strong tradition of investing in robust longitudinal evaluations of new interventions.²⁷⁷ The approach of the UK government in recent years has largely been to import evidence-based programmes that were originally developed abroad, such as Triple P and the Family Nurse Partnership, and adapt them for a UK context. This process can mean that good practice developed locally is bypassed; not because it is ineffective but because it has not yet been evaluated to a sufficiently high standard. Increasing the use of voluntary and community sector organisations in delivering parenting and early years services may exacerbate problems with identifying effective practice as these organisations often lack the resources and skills base to measure their social impact effectively.²⁷⁸

If we are to ensure that the early intervention grants are used effectively, commissioners must either stipulate the use of evidence-based programmes or must include in their grants a budget for a robust evaluation of the outcomes achieved by the services they fund.²⁷⁹ Without these stipulations, the impact of Sure Start on parenting and children's outcomes may become diluted by an increasingly fragmented approach to service delivery and the use of ineffective interventions. There is also a need to consider how we can build our national knowledge base of effective approaches.

Case study 4 describes an evidence-based parenting programme that exemplifies a promising 'Big Society' approach to supporting parents. Evaluations of the programme Families and Schools Together (FAST) recently piloted by Save the Children have shown that it improves parenting style and attachment, successfully engages members of the local community as volunteers, helps parents to build informal social networks, and supports parents to become more involved in their local community.

Case study 4 - Save the Children FAST programme

Families and Schools Together (FAST) is an evidence-based programme that was originally developed in the USA by Dr Lynn McDonald. FAST is one of eight parenting programmes to be kite-marked as evidence-based by the Children's Workforce Development Council.²⁸⁰

In 2010 Save the Children piloted the FAST programme in five primary schools around the UK, located in West Belfast, West Dunbartonshire, Caerphilly, Manchester and Ealing.

Programme aims

The FAST programme has three core aims:

- to help children succeed at school by improving their behaviour, supporting better home-school relationships, and improving their educational achievement in reading, writing and maths
- to strengthen families by improving attachment between parents and their children, improving communication and building parents' confidence
- to strengthen communities by building trust between parents and reducing social isolation

Programme design

The FAST programme has three distinct phases. The first phase is focused on community outreach. During this phase, a multiagency team is set up to deliver the programme and build a supportive community around the school. This team includes trained FAST facilitators, 'parent partners' (parents with children at the school), 'school partners' (members of staff from that school) and community-based partners (other local professionals, such as health and social workers, and other members of the community). The team then recruits families to participate voluntarily.

The second phase of the programme is an eight-week course. This course is designed to help build relationships between parents and their children, parents and the school, and parents and other parents. Each weekly session includes the following six elements:²⁸¹

- a meal shared as a family unit
- communication games played between the family at their own table

- time for parents talk to other parents
- a self-help peer-support session (without children present)
- · one-to-one time (or 'special play') between parent and child
- a fixed lottery, which each family wins once, in which they receive a hamper of goods to help them support their child's learning at home, followed by a closing game for the whole group

During the third phase of the programme parents continue to meet every month for 22 months. Parents who have graduated from an eight-week FAST course plan and lead these meetings with ongoing support from the school. This ensures that relationships and support networks developed during the FAST programme are sustained, strengthening the community of parents surrounding the school.

FAST in Ealing

Demos visited the FAST pilot site in Ealing in September 2010 to observe the seventh week of the eight-week course. The deputy headteacher of the Ealing primary school said that FAST had appealed to the school because staff had experienced difficulties trying to engage vulnerable parents who were often socially isolated. She commented that FAST had been logistically demanding to set up, as it required a lot of space and staff time to run the sessions. However, she said these challenges were worth the results the programme was achieving. After eight weeks teachers had observed noticeable changes in children whose behaviour had been difficult, as they were now much less disruptive in class. The school now had a strong network of parents who are more willing to come into the school and get involved with events and talk to teachers. This year a group of parents in the Sri Lankan community who had been involved in FAST came to the summer fair for the first time and brought home-made food. Previously, these parents hadn't come into the school at all. Since the programme had finished, all the parents who were involved in the programme had asked to take part in a school trip together.

The family therapist who supported FAST in Ealing as a community partner also perceived clear benefits. She said, 'This is the only initiative that leaves the school with a resource', as FAST helps parents to develop lasting social networks and a better relationship with the school. This therapist commented that she could see the positive impact that the peer-support sessions were having on parents. By the eighth week some of the parents in the parents' group looked less depressed and seemed less isolated than they did in the beginning.

UK FAST programme outcomes

Middlesex University has conducted an independent evaluation of the outcomes achieved by the Save the Children FAST pilot across the five different primary school sites. Statistically significant outcomes achieved by the programme included:

- *improved family functioning:*
 - · Parent-child relationships improved by 19 per cent
 - Nearly four-fifths (78 per cent) of parents had a better understanding of their children and less conflict in the home
 - SDQ²⁸² pro-social behaviour increased by 12 per cent
 - · SDQ emotional symptoms reduced by 40 per cent
 - · SDQ conduct problems reduced by 39 per cent
- reduced risk of educational failure:
 - 88 per cent of parents reported that they felt more able to support their child's education
 - The impact of emotional and behavioural difficulties in the classroom as measured by the SDQ had reduced by 46 per cent
- · strengthening parents' social networks and informal support
 - Nearly three-quarters (74 per cent) of parents reported they had more friends and more local support
 - · Support provided to others increased by 45 per cent
 - · Support received from others increased by 70 per cent
 - · Total reciprocal support increased by 56 per cent

- During FAST 26 per cent of parents had attended more parent teacher association meetings
- During FAST 25 per cent had attended more community centre activities

Next steps

The Save the Children FAST pilot has been funded by a combination of corporate sponsors, donors and trusts. In the future Save the Children plans to work in partnership with local authorities to mainstream funding for the delivery of the FAST programme and identify schools in disadvantaged areas that could particularly benefit from the programme. In each site, Save the Children will train the school's multi-agency facilitation team to deliver the first cycle of the eight-week course. The schools will then run subsequent cycles of the course with different families, embedding the programme in the school and community. Save the Children will provide quality assurance to make sure that fidelity to the original model is maintained.

10 Supporting stable relationships and shared parenting

This section will investigate a number of policy priorities articulated by the coalition government that are aimed at supporting stable relationships and overcoming barriers that may prevent parents from sharing their parenting responsibilities and achieving a successful home–life balance. The coalition government's Childhood and Families Task Force has been set up to investigate a number of policy proposals including:

- · whether marriage should be recognised in the tax system
- how to support stable relationships and prevent family breakdown
- how to support shared parenting by helping parents achieve a better work–life balance through more equal parental leave and flexible working
- how to achieve a better gender balance in the early years workforce²⁸³

In this section we will discuss some of the broad policy directions that have been articulated in these areas, in the context of the previous government's approach, before drawing on our own research to recommend how the coalition should shape its policies in these areas.

Coalition policies

Recognising marriage in the tax system

The Conservative party's 2010 manifesto pledged that the party would recognise marriage and civil partnerships in the tax system to send the signal that 'we value couples and the commitment that people make when they get married'.²⁸⁴ In a speech entitled 'Mending our Broken Society' in January 2010, David Cameron argued that supporting marriage would help to make Britain a stronger country by reducing family breakdown, and that Britain is unusual among other European and OECD countries in not recognising marriage in the tax system. The tax break would apply to married couples and civil partners earning less than the £44,000 threshold, where one partner was not using their full personal tax-free income allowance, and would be worth around £150 per year.²⁸⁵

However, the Liberal Democrats have been vocal opponents of this policy arguing that a tax break for married couples would be expensive and would not benefit children living in poverty in single parent families. The Liberal Democrats argue that funds the Conservative party would like to direct towards incentivising marriage would be better directed towards 'tackling the poverty of all children, whether their parents are married or not'.²⁸⁶ The coalition programme for government has accommodated these differences of opinion by making provision for Liberal Democrat MPs to abstain on budget resolutions to introduce transferable tax allowances for married couples.²⁸⁷ The Childhood and Families Task Force, which is chaired by David Cameron, will seek to resolve the coalition's differences of opinion on whether marriage should be recognised in the tax system.²⁸⁸

Supporting stable relationships

The Labour government's approach to family policy was initially far more focused on supporting improvements in parenting than it was on supporting stable couple relationships.²⁸⁹ However, The Children's Plan, published in 2007, argued that support for couple relationships was an essential basis for an effective family policy.²⁹⁰ This new emphasis on couple relationships was supported by the announcement of £5.1 million of funding for relationship support services in December 2008, and additional funding for pilots that would investigate models for delivering joined-up local support for parents who were separating, with the aim of minimising the impact of family break-up on children's lives.²⁹¹ Ten pilot areas were identified and these will run until April 2011, with an evaluation published soon afterwards. In 2008 the government also announced that a new programme called Antenatal and Preparation for Parenthood would be developed to help prepare new parents for the challenges of parenting, and the new pressures and strains that this may bring to their relationship.²⁹² This was to be tested in a number of settings, such as GP surgeries and Sure Start centres, before being made more widely available.²⁹³

As discussed above, the Liberal Democrats and the Conservatives differ in their position on recognising marriage in the tax system. However, both parties are committed to making the support of stable couple relationships one of the government's key family policy aims. In his speech launching the Childhood and Families Task Force Nick Clegg emphasised the importance of stable couple relationships to children's well-being and acknowledged that 'family breakdown plays a big part in cycles of disadvantage'.294 To help support stable couple relationships, the coalition government has pledged to 'put funding for relationship support on a stable, long-term footing, and make sure that couples are given greater encouragement to use existing relationship support'. It has also pledged to review family law to see how the use of mediation when couples do separate can be increased, and to investigate how the access rights of non-resident parents and grandparents can be better supported.295

More equal parental leave

The coalition's programme for government made the commitment that the coalition would 'encourage shared parenting from the earliest stages of pregnancy – including the promotion of a system of flexible parental leave'.²⁹⁶ The Childhood and Families Task Force is currently engaged in exploring what form this policy for more flexible parental leave might take.

The previous government enacted a number of measures to increase parents' entitlement to parental leave. In 2003 statutory maternity pay and maternity allowance were extended from 18 weeks to 26 weeks, and in 2006 they were further extended to 39 weeks.²⁹⁷ Mothers who qualify for statutory maternity pay are paid 90 per cent of their average gross weekly earnings with no upper limit for the first six weeks of their maternity leave. For the remaining 33 weeks they are paid at the standard rate of £124.88 per week, or 90 per cent of their average gross weekly earnings, whichever is lower. Employed mothers are allowed to take up to a year's leave after the birth of a child, although the final 13 weeks are unpaid.²⁹⁸

Statutory paternity leave and pay were introduced for the first time in 2003. Under this legislation fathers are entitled to receive two weeks of paid leave, which is paid at the statutory rate of £124.88 per week.²⁹⁹ From April 2010 new regulations were introduced entitling fathers to take up to 26 weeks of additional paternity leave if the mother returns to work before the end of her maternity leave. This effectively allows the transfer of part of the mothers' maternity leave to fathers. Leave is only payable during this period if the mother would have been eligible for statutory maternity pay. The regulations stipulate that additional paternity leave cannot be taken in the first 20 weeks after the child is born and must end no later than the child's first birthday.³⁰⁰ In addition to paternity and maternity leave, both parents are also entitled to take up to 13 weeks of unpaid parental leave before the child's fifth birthday, with no more than four weeks of leave taken in any year.³⁰¹

Flexible working

'Flexible working' includes flexibility of time or location and may include working part time, compressed hours, during term only, from home, or at another location away from the employer's premises.³⁰² The previous government first implemented the right to request flexible working for carers and working parents with children who were aged 6 or under in 2003. In 2009 this right was extended to parents with children up to the age of 16.³⁰³

To further support parents' ability to achieve a work-life balance, in June 2010, the Deputy Prime Minister announced that the coalition would extend the right to request flexible working to all employees. In so doing, it aims to reduce the perceived stigma which acts as a barrier to some parents – particularly fathers – making a request for flexible working arrangements.³⁰⁴ To move this forward, BIS has begun a consultation with business on extending flexible working to all employees, ending in March 2011. In the shorter term, the BIS Business Plan also indicates that the coalition intends to implement secondary legislation in 2011 to extend this right to request to the parents of children aged up to 18.³⁰⁵ The analysis below looks in more detail at the impact that the right to request flexible working is having on shared parenting and highlights some of the continuing barriers to parents' – and particularly fathers' – ability to work flexibly.

A better gender balance in the early years workforce

To promote positive role models of men as caregivers, and encourage fathers to engage with early years services, the coalition has also announced that it will seek to promote 'a greater gender balance in the early years workforce'.³⁰⁶ The previous government also made efforts to increase the number of men working in early years services. In 2001 the Department for Education and Skills set itself the target that it would increase the percentage of male childcare workers from 2 per cent to 8 per cent by 2004.307 However, this target was missed and the percentage of men in the early years workforce has remained stable at about 2 per cent.³⁰⁸ While increasing the number of men in the early years workforce is one important way of changing perceptions about gender roles in care giving, this is not the only change that needs to be made to early years services to support shared parenting. This issue will be explored in more detail in the discussion below.

Towards stable relationships and shared parenting: unresolved issues

A strong body of evidence shows that fathers' involvement in their children's lives tends to have a positive effect on their outcomes.³⁰⁹ Fathers' interest in their children's education is

associated with children having better educational attainment. If a father is involved in a child's life from an early stage, this is also associated with the child experiencing fewer emotional and behavioural problems if the parents' relationship breaks down.³¹⁰ Given the important relationship between fathers' involvement in care giving and children's outcomes, it is appropriate that government should support policies that help fathers to take a shared parenting role and support stable couple relationships. However, there are less clear arguments for explicitly rewarding marriage over and above other forms of committed relationship.

Supporting stable couple relationships or marriage?

As the research in chapter 4 showed, the benefits to both children and parents of warm, stable and supportive family relationships cannot be overestimated. Strong couple relationships have a positive impact on children's and adults' emotional well-being, as well as supporting more effective parenting.³¹¹ The parents in our study reported that conflict with their partners made parenting more stressful and that it was harder to maintain consistent boundaries if parents did not have a shared approach to parenting. Supporting stable and committed couple relationships is clearly an important area for government policy given the extensive research literature on the negative effects of relationship conflict and relationship breakdown on children's outcomes.³¹²

However, as our research has shown, the Conservative party's current emphasis on incentivising marriage is a distraction from the real challenge, which should be to ensure that children grow up in stable and nurturing environments that support their social and emotional development. It is the quality and stability of couple relationships, and parent–child relationships in a family that influences children's outcomes, rather than a particular type of family structure.³¹³ Government policy should therefore focus on investing in relationship quality through relationship support and parenting programmes, rather than promoting one type of family structure.

The research outlined in chapter 4 also showed that the

transition to parenthood can be a major challenge for parents, with new parents experiencing particularly high levels of dissatisfaction with their relationship, increasing the risk of relationship breakdown. Policy makers should therefore pay particular attention to the key transition points before and after the birth of a first child when considering the points at which relationship support could have the most positive impact. Interventions that prevent conflict from developing in a relationship in the first place is likely to be more effective than addressing conflict once it has arisen. Antenatal classes and health visiting could both have a very important role in preparing new parents for the changes to their relationship they are likely to experience, and the challenges associated with developing a shared approach to parenting. Parents tend to be more open to support in the period around the birth of a child and a survey conducted by the Family and Parenting Institute in 2007 found that 71 per cent of parents thought that health visitors should give parents support with 'their own emotional health and relationships'.314

More equal parental leave

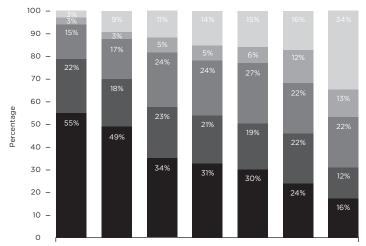
As noted above, the coalition government's Childhood and Families Task Force is currently investigating a number of policies that could contribute to parents achieving a better work–life balance and a shared approach to parenting. Our research has shown that financial considerations have an important influence on parents' decisions on how they allocate parenting roles, which must be taken into account if we are to design employment policies that give both parents an opportunity to take a role in care giving.

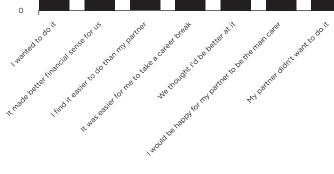
Our parenting poll (see figure 5) found that 67 per cent of parents of UK parents surveyed agreed or slightly agreed with the statement that they were their child's main carer because it made better financial sense. Only 12 per cent of parents disagreed or slightly disagreed with this statement. A YouGov survey commissioned by the Equality and Human Rights Commission (EHRC) in November 2009 reflected similar

Figure 5 Reasons behind the decision to be the main carer



Dads agree	63%	63%	51%	44%	40%	63%	31%
Mums agree	83%	67%	60%	43%	54%	38%	27%



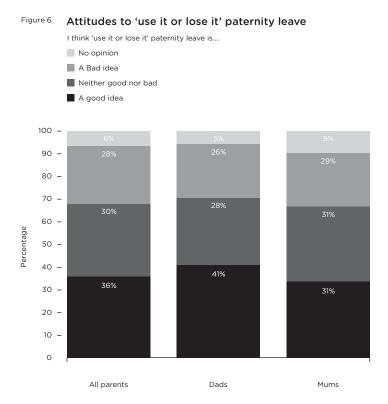


findings, with nearly half of parents (47 per cent) believing that 'whichever partner earns more should stay at work, regardless of gender'.³¹⁵ However, as figure 5 shows, our poll showed that personal motivations for wanting to be a carer were even stronger than financial ones.

Financial considerations also clearly impact on patterns of parental leave-taking. The YouGov survey by ECHR found that 55 per cent of fathers had taken paternity leave and of those who hadn't, 88 per cent would have liked to. Of those who did not take paternity leave, 49 per cent said they could not afford it and 19 per cent were too busy at work or thought their employer did not want them to take leave. When parents were asked what they thought of current parental leave entitlements, the most frequently given answer was that it should be paid more.³¹⁶

Other evidence cited by the EHRC suggests that parents are unwilling - or unable - to take parental leave that is not paid. Research by Smeaton and Marsh found that in 2005 only 11 per cent of mothers had taken unpaid parental leave, and only 8 per cent of fathers took unpaid parental leave.³¹⁷ The survey in 2005 found that 94 per cent of fathers took some form of leave after their child was born, but while two-thirds of fathers took paid paternity leave, over half took some other type of leave to 'top it up' and about a quarter took annual leave instead of paternity leave.³¹⁸ This suggests that fathers have to 'balance familial and financial considerations' when taking leave, and that taking paternity leave at the statutory rate is not always financially viable.³¹⁹ The fact that fathers are only currently legally entitled to two weeks of leave at the statutory rate, unpaid parental leave, or additional paternity leave, which is only payable if the mother is entitled to statutory pay but has returned to work early, is therefore likely to act as a considerable disincentive to fathers taking more than minimal amounts of leave when their child is born.

Given that most fathers want to take leave when their children are born, the government has an important role to play in reducing the financial disincentives that are preventing fathers from sharing parenting responsibilities more equally from early on in their children's lives. In addition to better pay, there is



also evidence from countries including Iceland and Norway that a ring-fenced allocation of leave for fathers that does not take away from mothers' leave entitlement increases the uptake of parental leave.³²⁰

Our parenting poll found that 41 per cent of fathers were in favour of introducing a system of 'use it or lose it' paternity leave, and an average of 36 per cent of all parents thought this was a good idea (see figure 6). When asked how they would divide up 52 weeks of flexible parental leave, the average amount of time parents said they would take for themselves was 29 weeks (slightly more than half the entitlement), while 26 weeks (half

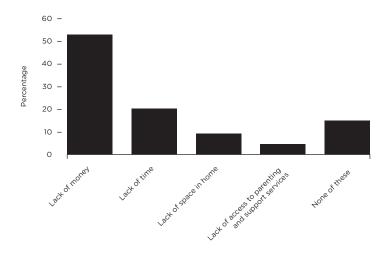


Figure 7 Practical obstacles faced as a parent

the entitlement) was the most commonly mentioned amount. A YouGov survey found that 61 per cent of parents supported a proposal for ring-fenced additional leave for fathers.³²¹ It is clear that UK parents – and fathers in particular – are in favour of a better paid, more equal system of parental leave that would enable fathers to take a stronger role in care giving for their children, and this progressive attitude should be reflected in leave policy.

Flexible working

Our ethnographic research highlighted the pressures on parents' time caused by the difficulties of balancing work and home life as a key source of stress in their lives. Our poll found that 20 per cent of parents cited lack of time as the greatest obstacle they faced as a parent. This was the second greatest obstacle after lack of money (see figure 7). This seems to be a bigger issue for fathers than for mothers, as 26 per cent of fathers reported lack of time as an obstacle they faced as parents compared with only

15 per cent of mothers. Research by the EHRC found that nearly a quarter of fathers said their working arrangements caused 'tension and stress' at home.³²² In recent years, the main government strategy to support parents to achieve a better work–life balance has been the introduction of the right to request flexible working. Evidence suggests that this policy has helped matters but does not yet go far enough, and that it is currently benefiting more women than men.

Research recently conducted by the Government Equalities Office found that just over half of working parents (51 per cent) feel that their relationship with their children would improve if they could work flexibly. However, a significant number of parents (20 per cent) are unaware of their right to request flexible working, and even those who are aware of the right are often apprehensive to exercise it. Two parents in three (66 per cent) were concerned about making a request to work flexibly to their employer and said that this concern may prevent them from doing so. One parent in three (32 per cent) felt that requesting flexible working could indicate that they were uncommitted to their job while one in four (23 per cent) thought that such a request could adversely affect their promotion prospects.³²³

The perception that flexible working may damage career prospects is particularly strong among fathers. In a YouGov survey commissioned by the EHRC in 2008, 49 per cent of fathers said that flexible working was available to them, but only 30 per cent were using it. More than a third (36 per cent) of fathers thought that flexible working would make them look uncommitted to their job and nearly half (44 per cent) would not request flexible working because it might negatively affect the prospect of promotion. Lack of awareness was also a significant problem, with only a quarter of fathers knowing that parents of children up to the age of 16 had the right to request flexible working.³²⁴

These factors have contributed to a gender imbalance in flexible working. Fewer men than women request to work flexibly, fewer have their requests accepted, and men are less successful than women when they take their cases to tribunals: 10 per cent of women (235,000) have their requests rejected compared with 14 per cent of men (177,000).³²⁵ Male claimants counted for 27 per cent of flexible working tribunal claims but accounted for 45 per cent of cases that were not accepted.³²⁶ Employers therefore have an important role in supporting fathers as well as mothers to work flexibly. Some sectors are also more supportive of flexible working practices than others. The EHRC's survey found that 60 per cent of fathers working in business or finance thought that the option to work flexibly was available to them, in comparison with only 30 per cent of fathers who worked in the manufacturing industry.³²⁷

The coalition government's plans to extend the right to request flexible working to all employees to help reduce the stigma associated with flexible working is a positive development. However, there is clearly much more work to be done with employers to reduce the barriers to flexible working that currently prevent requests by employees – and particularly fathers – from being accepted.

Father-friendly services

The coalition's plans for supporting fathers to take a more active role in caring for their children have mainly focused on supporting more flexible parental leave and day-to-day working arrangements.³²⁸ Parenting and early years services could also have an important role to play in supporting some fathers to take a more active parenting role, by building their confidence in their parenting skills and providing access to informal support networks. However, a number of studies have demonstrated a low level of engagement from fathers in parent support services, suggesting that many fathers may be either unwilling or unable to engage with the types of support that are currently on offer.³²⁹

A 2008 review commissioned by DCSF to investigate how national policy could better support fathers found that 'virtually all local authorities and family services reported that engagement with fathers was substantially lower than with mothers'.³³⁰ One of the main reasons for this may be that fathers are still much less likely than mothers to be their child's primary carer; only around 9 per cent of fathers have primary responsibility for childcare, 2 per cent of whom are lone parents.³³¹ Lack of availability of services outside working hours may also be a significant factor. However, it is unclear whether practical reasons can fully explain fathers' low uptake of services, whether fathers also feel unwelcome or whether the services are unsuitable. Potential barriers to fathers' involvement in early years services identified in the DCSF strategy *Every Parent Matters* included:

- services being insensitive to fathers' needs (eg failing to connect with fathers' lives or their motivations)
- a female focus and culture among staff and service users
- under-estimation of fathers' involvement in their children's lives if they do not use the service or live with the child³³²

The coalition government's interest in increasing the numbers of men in the early years workforce could help address some of the barriers to fathers engaging with early years services,³³³ but this measure will be insufficient on its own. Recommendations in chapter 10 will explore a broader set of measures to support fathers' engagement with parenting and early years services, while case study 5 describes a service developed by the children's charity Coram to support fathers to take a more confident and proactive role in their children's lives.

Case study 5 - Coram Father Involvement Project (Barnet)

The Coram Father Involvement Project is a borough-wide service commissioned by Barnet Borough Council. The project works with fathers of children from pre-birth to 5 years old. The project first began to operate in Barnet Sure Start centres in 2005 and in 2009 it was recommissioned until March 2011.

Engaging fathers

With the Father Involvement Project, Coram aims to transform how children's services engage with families. Chris Muwanguzi, the project manager, has observed that when a father and mother walk into a children's centre, staff often forget to acknowledge the father and frequently do not take his contact details. Fathers may be ignored by children's services unless they are perceived to have done something wrong, which can make fathers feel stigmatised and unwilling to engage with services. The purpose of the Father Involvement Project is to change the way that children's centres relate to fathers, ensuring that both fathers and mothers can feel confident in accessing services, and that the father's role as a caregiver is recognised and supported.

Fathers' workers

The Father Involvement Project manages a network of fathers' workers who operate as part of the multidisciplinary team working in each children's centre in Barnet. Fathers' workers are each trained to a minimum of a Level 3 qualification in working with parents.

Each fathers' worker has a caseload of between three and five fathers over a period of three months. They provide support to families including information, advice and guidance (including benefits advice), support fathers to access other services (such as mental health or drug and alcohol services) and provide guidance on fatherhood, building attachments with their children, and supporting their children's development. Each family that is part of a fathers' worker's caseload will have a clear six-week action plan identifying agreed goals for the family. Most fathers will be referred to a parenting programme as part of the intervention.

Reasons for an intervention

Fathers may be referred to a fathers' worker for a range of reasons; some referrals are made by social services and some fathers directly seek support from the service. Reasons for a referral may include attachment issues, lack of confidence in parenting, domestic violence, child protection issues, bereavement, relationship breakdown or supporting fathers' contact with their children if the child is in care. Fathers' workers focus primarily on strengthening the relationship between father and child and increasing fathers' confidence in caring for their children, but when requested they also provide group activities for fathers and mothers to help build couple relationships and encourage mothers to recognise the value of having a male carer in their children's lives.

Activities

In addition to their caseload, the fathers' workers regularly run parenting programmes such as Strengthening Families Strengthening Communities, in partnership with the children's centre for mothers and fathers, and have recently run Triple P programmes for fathers. If fathers are unwilling to take part in a group session, training may be delivered to individuals.

Each Saturday the Father Involvement Project also provides activities for male carers in children's centres across Barnet. These are particularly aimed at building the confidence of fathers who have little experience of parenting and may be unconfident about spending time alone with their children. Activities include arts and crafts, messy play, a visit to a swimming pool, a baby massage class, or teaching fathers to read stories imaginatively.

Demos visited a Saturday activity session for male carers in a Barnet children's centre in October 2010. Fathers in attendance came from a wide range of different backgrounds: some had lived in the area for a long time, and others were fairly recent immigrants. Most fathers had brought one child with them (ranging from very small babies to 4 or 5 year olds) and they were taking part in a range of activities including arts and crafts and playing in the indoor 'soft play' room.

It was striking that the fathers were all very attentive towards their children and did not seem to view the session as an opportunity to socialise. One father commented that he has been attending sessions for a while and he tries to introduce people, but not all of the dads are interested in getting to know each other. The fathers' worker we spoke to commented that in his experience mothers are more likely to use activities as an opportunity to meet other mothers, whereas fathers are less interested in this dimension and tend to be more focused on their children. The Saturday activity sessions provide many fathers with a supportive environment for engaging individually with each of their children.

Future aims

Chris Muwanguzi would like to develop the model of the Fathers Involvement Project so that rather than providing specialist fathers' workers, the project would provide champions of fathers' services to influence systemic change in how Sure Start services are delivered. These champions would train workers at Sure Start and in other services (eg social workers) to engage constructively with male carers, with the goal that all workers in children's services would understand the importance of valuing and supporting the role of male carers in their children's lives. While it is important that children's centres are accessible to fathers and can fit around working hours, Saturday sessions need not necessarily be for fathers only.

11 Recommendations

In the course of researching this report we found several gaps and concerns with the current policy framework and the position set out by the new government. The recommendations below are as much about identifying the appropriate and necessary political vision for parenting as they are about making specific, targeted changes to services. It is important to acknowledge that policy, and indeed the wider the political approach, can shape the context for parenting, but that the evidence shows that there are limits to this: parents do not make decisions about family formation based solely on issues of financial well-being, so financial incentives to marry or have children earlier are unlikely to work. But in some ways the policy context can affect parents' decisions, particularly low to middle earners who depend on childcare and benefit support in order to balance work and child caring.

The recommendations below set out a Big Society approach to parenting, in which parents are empowered rather than (just) supported. They are organised within five key policy aims:

- · build the parenting skills base
- · target parenting support according to need
- · apply the early intervention principle beyond the early years
- · make shared parenting a reality
- · support social networks and collective efficacy

Build the parenting skills base

1 Set the standard for reliable parenting information and advice

Given the impact of parenting on child outcomes, it is fair to say that parenting is an issue of public health.³³⁴ Although it is

politically difficult for politicians to promote particular forms of parenting there is evidence that some forms of parenting are more effective than others and to an extent this already informs the way in which government parenting programmes have been developed.

But what parents seem to want and need from government is not officially stamped parenting literature (in fact this is the least well-liked and trusted source of advice) but for government to set the standard of information on parenting in the background.

Government should not invest more funds in developing official parenting literature. Instead, funding should be rerouted and made available to support third sector organisations and online parenting forums to deliver information on effective parenting, as well as to create engaging and accurate broadcast material, with government setting clear guidelines on high quality parenting advice and retaining responsibility for safeguarding the standard of information from third-party sources.

2 Improve recruitment and retention of health visitors

Despite the coalition's commitment to increasing the health visiting workforce, there is a lack of detail about how to encourage more people to become health visitors and how to retain them; currently, the health visitors are declining in number and ageing.

The training structure for health visiting is a key barrier to increased recruitment. As things currently stand, health visitors must qualify as nurses and spend three years in preregistration nursing before they can become health visitors. This is similar to some models of midwife training, yet they are paid less than midwives (and as we explain below, midwifery has adapted training to widen the talent pool). Training places for health visitors are currently heavily oversubscribed. Although crucial learning takes place during nursing training and practice, it is certainly the case that some aspects of nursing training such as caring for terminally ill patients are unnecessary to prepare for the role of health visitor.³³⁵ A new model of health visitor

training is being developed in Cornwall and Isles of Scilly Primary Care Trust where nurses carry out their training while practicing with a qualified health visitor, and there has been an increase in interest in and recruitment levels to the primary care trust as a result.³³⁶ Hybrid models such as this should be encouraged where evidence shows that quality and expertise is not affected.

A lack of career progression in the health visiting service also acts as a disincentive. A specific career track for health visitors should be established with salary bands and junior and senior roles developed.

Finally, the profession needs urgently to be reinvigorated, to appeal to younger age groups. 'Fast track' courses aimed at university graduates in subjects such as psychology, sociology or biology would offer a new route into employment at a time when graduate unemployment is high. Midwifery, which remains of an internationally high standard in the UK, is an excellent example of how fast track courses in which a nursing degree is not a prerequisite for progression can be successful without jeopardising quality and standards.

3 Broaden the health visitor role to make health visitors a universal frontline parenting support service

There is huge unmet potential in the health visiting role, which has not yet been realised. We recommend that the range of services that health visitors can provide is broadened but that the caseloads they carry is narrowed.

Health visitors are often the first point of contact new parents have with health services. They are trusted and welcomed by parents, who often prefer help and advice from health visitors in their homes over the help of friends, family, nurses and volunteers.³³⁷ However, health visitors are currently spread too thinly and their training is too narrowly focused on health related aspects of child development.

Their role must be broadened so that they are able to fulfill the following roles:

- · light-touch screening infants for developmental problems
- · advising parents on parenting style
- advising parents on supporting their children's learning and development
- giving preventative health advice
- signposting parents to early years services like Sure Start, baby groups and nurseries
- working closely with children's centre staff and particularly outreach workers to support vulnerable families
- · supporting breastfeeding and healthy eating
- giving general advice and support to parents, for example, on housing or financial difficulties that may result from having a new child³³⁸
- giving support for attachment problems, post-natal depression and relationship difficulties
- for all of the above, referring parents to further support where required

To prepare health visitors for this broadened role in addition to the medical aspects of health visiting, they should be trained in the following areas:

- identifying, referring, supporting parents suffering from postnatal depression³³⁹
- building trusting relationships with vulnerable and disengaged parents, with a particular focus on engaging fathers and male carers as well as mothers
- assessing parent-child interaction³⁴⁰
- assessing children's healthy emotional and behavioural development³⁴¹
- promoting attachment and bonding between parents and infants
- supporting parents to adopt an effective parenting style, using evidence-based parenting programmes
- giving relationship advice to new parents on managing conflict and parenting in partnership
- working as part of a multi-agency team alongside other early years practitioners, medical staff and social services

Such training could be shared by a number of early years professionals including Sure Start practitioners and midwives.³⁴² It may also be relevant to parent liaison officers in primary schools. Shared training programmes for practitioners across early years services could provide a common frame of reference for integrated working.

Target parenting support according to need 4 Integrate health visiting with local children's and health services

Health visitors are the all-important first contact between parenting support services and new parents in most cases. Too often the relationship ends after one or two visits and families are not plugged in to the wider support services on offer in their community. We have a universal infrastructure for early years and parenting support through Sure Start children's centres, but too often centres are not aware of vulnerable families in their area who could benefit from their support. Families in need may never even be registered. Alternatively, in some cases health visitors and Sure Start outreach workers make family visits without having contact with each other, leading to confusion and inefficient use of time and resources.³⁴³

To address these problems, health visiting and maternity services must be more closely integrated with Sure Start programmes.³⁴⁴ The current direction of travel towards health visitors being based at children's centres is the right one, but there is more to be done to ensure that health visitors and Sure Start practitioners work together as an integrated team:

- Health visitors should register parents for Sure Start on their first visit to a new family, ensuring that all the child's main carers are registered. This will be discussed in more detail in recommendations under 'making shared parenting a reality'.
- When a health visitor identifies a family with additional support needs, the health visitor should work in a coordinated way with local health services, Sure Start outreach workers, family support workers and other early years professionals to decide the nature

of the support required and who will be responsible for providing it.

- When health visitors make referrals for parents who need extra support, they should liaise and broker the new relationship until it solidifies. Health visitors need to take a more active role not only in making referrals but also in ensuring that vulnerable parents are able to develop a new relationship with the local children's centre.
- Clear data-sharing protocols between health visitors and Sure Start children's centres should be established.

5 Refocus Sure Start according to the principle of progressive universalism

To guarantee maximum engagement across the social spectrum, Sure Start should continue to provide a universal service to all families, with health-focused services and informal services that promote social mixing and building social networks such as breastfeeding cafés, Stay and Play activities and activity clubs remaining universal.

More resource-intensive services such as evidence-based parenting programmes could then be targeted on the basis of need – and this requires a sophisticated targeting tool, not one based solely on income as the indicator of need. To support accurate needs assessment, government should commission the development of a diagnostic screening tool for children and their parents, similarly to Frank Field's recommendation of compulsory testing for behavioural development in his review of poverty and life chances.³⁴⁵ This would cover post-natal depression, attachment and bonding in the early years, child emotional and behavioural development, and cognitive and linguistic development. The screening tool would be used by early years professionals including health visitors and Sure Start practitioners to identify underlying problems where they exist, so that parents can be referred to more intensive support services. The tool should make use of evidence-based, validated assessment tools such as the SDQ:346

6 Cap health visiting caseloads in disadvantaged areas

It is important to note that extra training and more integrated working will not be effective unless health visitor caseloads are reduced, particularly in deprived areas. Health visitors need to be able to spend enough time with vulnerable new parents to build a trusting relationship and provide the support they need. To help make this possible, more health visitors should be allocated to the most deprived areas; evidence suggests this is not currently the case.³⁴⁷

The Flying Start programme in Wales provides support for children aged under 4 and their families, and is targeted at disadvantaged areas in each local authority. The programme specifies that health visitors working in these disadvantaged areas must have a caseload of no more than 110 families. The government should investigate capping the caseloads of health visiting teams in the most deprived areas.

Apply the early intervention principle beyond the early years

7 Develop a second tier of screening for primary school children

As described in a previous recommendation, government should support the development of a universal diagnostic screening tool to help early years practitioners or teachers to identify whether children have any problems that may require extra support. Like the SDQ screening tool, this should be adaptable for children of different age groups. When children first arrive at primary school this tool should be used to assess their emotional and behavioural development and cognitive and linguistic development.³⁴⁸ In cases where parents have not engaged with early years services, it is likely that some children may have problems that have previously gone unnoticed.

Where any developmental or behavioural issues are identified, this assessment would provide an opportunity to engage parents and identify if there are any problems in the parent-child relationship or in other areas of the parent's life that the school could provide support with. Schools can then directly support parents with these problems or where necessary refer parents to appropriate specialist services.

8 Ensure that every primary school has a parent liaison officer

The previous government created the expectation that schools should offer support for parents as part of their responsibility for supporting children's broader social and emotional well-being as well as their academic learning.³⁴⁹ As this study has shown, effective parenting and strong parent–child relationships are central to children's well-being, therefore primary schools must continue to provide a designated member of staff such as a parent support adviser or learning mentor who is responsible for engaging parents, identifying any support needs they may have, and supporting them to adopt effective parenting styles. To support this role, parent liaison officers should be trained in an appropriate evidence-based parenting programme.

9 Develop a parenting 'booster' class

Relationships between parents and children change quickly over time, as children age and as parents tire of imposing discipline or change their approach. Our ethnographic research showed that the received wisdom that parenting gets easier over time and that it can be perfected with practice often does not play out in reality.

Government should commission the development of a parenting class aimed at parents when their children first start primary school. This would focus on helping parents to maintain and update good parenting approaches as their children grow up and would provide an important opportunity for the school to establish a relationship with parents early on.

Schools could either train their own teachers or parent liaison officers to deliver evidence-based programmes, or could commission this service from voluntary and community sector organisations. A programme like FAST would be suitable for schools in disadvantaged areas, as this has the benefit of high retention rates and proven success in engaging hard-to-reach parents.

Make shared parenting a reality

10 Reduce numbers of families in in-work poverty by supporting a living wage

The combined effects of financial and emotional stress that families in 'in work' poverty experience are hugely detrimental to effective parenting as well as having a direct, negative effect on child outcomes. Making work pay is an important goal for supporting parents as well as a broader goal for social justice. Demos supports efforts such as the London Living Wage campaign³⁵⁰ and Ed Miliband's proposal of providing tax credits to companies who pay their employees a living wage.³⁵¹ Demos echoes Deputy Prime Minister Nick Clegg's call to increase income tax thresholds for working families on low and middle incomes.³⁵²

11 Boost capacity of organisations to offer flexible work

In his speech to Barnardo's on 17 June, Deputy Prime Minister Nick Clegg announced the universal extension of the right to request to work flexibly with legislation to be implemented in April 2012, according to the business plan published by BIS.³⁵³ It is an important move towards making flexible work a common place arrangement and one less stigmatising to men. However, a right to request flexible work is just that, a request rather than an assurance. A universal right to request does not necessarily result in more people being granted flexible working arrangements – a fifth of employees' formal requests to change their working arrangements are denied – or more having the confidence to ask for it.³⁵⁴ Around 4.5 million employees say they want to regularly work from home but are prevented from doing so.³⁵⁵ The next step for policy makers is to develop measures that help businesses improve their offer in a cost-effective and productive way.

Research should be commissioned to produce evidence on how to tackle the cultural and organisational barriers that may

prevent companies being able to offer flexible working to employees without undermining productivity.³⁵⁶ Many are concerned about difficulties with treating all employees fairly, and maintaining proper communication with home and mobile workers to ensure they feel part of the team.³⁵⁷ There is little point in introducing legislation that would place an unwieldy bureaucratic burden on organisations.

Many employers have stressed the need for new models of organisation and technology, and better internal communication between and among employees and management as central to successfully introducing flexible working. The recession and subsequent rise in unemployment should be used as an opportunity to experiment with flexible working arrangements and shorter working weeks or working days, which will help alleviate financial strains on businesses.³⁵⁸ Government should also learn from best practice abroad: Denmark has been heralded as 'a pioneer' of flexible working practices reporting that reducing working hours – when employees are consulted – can lead to a better work–life balance without any negative impact on competitiveness.³⁵⁹

12 Adopt a model of equal parental leave

Government has made a commitment to introduce flexible parental leave for mothers and fathers and will publish their proposals in January 2011, with the consultation to be completed in March 2011.³⁶⁰ The UK's system of parental leave has seen great improvements in the shape of transferable leave and the introduction of statutory, paid paternity leave. However, there are key problems in the system as it currently stands as mentioned in the analysis in the last chapter. Specified leave between mothers and fathers is inequitably split and there are unhelpful restrictions on when transferable leave can be taken and when it is paid.

A system of parental leave that effectively encourages shared parenting should:

- involve elements of 'use it or lose it' leave for mothers and fathers or partners as well as an element of transferable parental leave
- provide a minimum of the two-thirds of earnings rate of pay supported by the European Commission for at least nine months of available leave

Currently, mothers are entitled to 26 weeks of 'ordinary maternity leave' and 26 weeks of 'additional maternity leave', making one year in total. You are entitled to the first six weeks of leave at 90 per cent of your average gross weekly earnings, with no upper limit. Following this, you may be entitled to receive statutory maternity pay for up to 39 weeks of the leave (paid at £124.88, or 90 per cent of your average gross weekly earnings, whichever is lower).

Demos recommends that government extends the higher rate of pay element of this leave by adopting the Icelandic model of extended paid parental leave. This model provides a standard total of nine months of paid leave in three instalments of three months, with one instalment designated to the mother, one instalment dedicated to the father, and one instalment that may be shared between parents. Special arrangements exist if there are complications in birth or if there are multiple births or health issues. Leave can be taken uninterrupted or interrupted as well as part time coupled with part-time work. Leave is paid at 75–80 per cent of earnings with a ceiling at earnings over €1,890 and a floor, so no one working full time receives less than €575. Separate rates apply for people working part time. Same sex couples and couples adopting a child under the age of eight are eligible for leave on the same basis.

In the Icelandic model, mothers are obliged to take two weeks of leave following the birth. In support of the 'health and welfare' view of maternity leave,³⁶¹ Demos recommends that government encourage mothers to take their leave first to support breastfeeding and a full recovery from pregnancy.

International evidence from the international network on leave policy and research collated by BIS shows that there is a strong relationship between fathers' use of leave entitlements and the availability of 'father-only', well-paid leave. In 2007, 88.5 per cent of fathers in Iceland took some portion of the available father-only leave. The general conclusion is that the more leave of this kind that is made available, the more fathers will take. Statistics on how many parents take unpaid leave are patchy; take up is thought to be very low by both fathers and mothers. It is likely that take up of unpaid leave is related to parents' socioeconomic circumstances, with parents from poorer families less able to take advantage of such offers. When unpaid or poorly paid parental leave is offered but there is no specification of which parent can take it, mothers take most or all of the leave. However, when that leave is paid relatively well, fathers' use is higher, suggesting that the incentive of paid leave is even more important for fathers than mothers, many of whom may be earning more than their partners. The international review also found that fathers' use of leave responds to policy changes that are targeted at them.362

13 Move fathers' involvement in parenting-related public services into the mainstream

Currently, services for fathers are add-ons to a general service aimed at and developed to suit mothers. Steps must be taken to move beyond the rhetoric about 'engaging fathers' including:

- taking more care to represent fathers through language and images in parenting support materials and pamphlets
- health visitors and Sure Start workers asking to register both parents of children being enrolled for Sure Start
- giving early years practitioners, including health visitors, training in proactively engaging fathers and other male carers and ensuring that services are 'father-friendly'
- $\cdot\,$ aiming at a more gender balanced childcare and early years workforce

So far, attempts to increase male participation in these employment sectors have had limited success. In 1996 the European Commission Network on Childcare set a target in countries including the UK to increase the number of male childcare workers by 20 per cent over ten years. A range of initiatives was funded and some were very successful, although no country achieved the target. Schemes such as men-only induction programmes for childcare training should be further developed and have had measurable effects on reducing male drop-out rates from training programmes.³⁶³

14 Government should not introduce a married tax allowance

Evidence shows that it is the quality of relationships rather than relationship status which has the greater effect on parental confidence and effectiveness, and hence on children's outcomes. There is no evidence of a 'marriage effect'; rather marriage is probably a proxy for more successful relationships. Government is right to support stable relationships in so far as they impact on children. However, many married couples do not have children, making this proposal both moralising and inefficient, as it draws resource away from some of the most at-risk families – single mothers. Tax allowances, if used to support families, should be aimed at families with children, for example through an increase in child benefit.

15 Improve relationship support by taking advantage of key transition points

The biggest transition point for couples is the birth of their first child. It is the moment at which relationships are most likely to start having difficulties, and the following few years are the most likely period for relationship breakdown to occur. Intervening before this point to help couples cope with the changes to their relationship is key to supporting stable families.

Antenatal classes should focus not just on mothers preparing for birth but also on preparing couples for relationship difficulties and sharing information on relationship maintenance strategies and sources of advice and help. A new antenatal programme, Preparing for Pregnancy, Birth & Beyond, was proposed earlier this year by the Labour government, aiming to integrate high quality antenatal support with wider guidance on parenthood and changes to family relationships. The coalition government should take this proposal further and develop and implement this programme.³⁶⁴

Health visitors should also provide advice and information to new parents on relationship support during their first home visit with new parents, as mentioned in the above recommendation to broaden health visitors' roles.

Support social networks and collective efficacy 16 Keep Sure Start open to all

As mentioned in the recommendation 'Target parenting support according to need', core Sure Start services like breastfeeding cafés and Stay and Play that support parents to socialise and build informal social networks should remain universally accessible. Peer mentoring schemes bringing together older and younger parents, or parents and grandparents, should be encouraged, as should volunteering schemes that support parents to get involved in their local community and build their employability skills.

17 Demos supports the coalition's plans to train community organisers and help set up new neighbourhood groups

Our research highlighted the fact that many parents feel socially isolated and want more opportunities to meet other parents informally and share their experiences. However, while parents spoke of the desire to socialise with other parents, they lacked the confidence to instigate such meetings. Many of the parents in our study were also concerned about the level of crime, drugs and gang-related violence in their local area.

The community organisers that the coalition government plans to fund in deprived areas could provide the focal point needed to encourage parents to establish new social networks and get involved in local projects. The summer holidays may be a particularly good time to instigate new group activities as parents can struggle to keep their children entertained and outdoor spaces such as parks can provide informal community meeting places. Local community venues should be made available to support groups to meet in the evenings.

Looser, more informal initiatives of this kind could complement the provision of structured evidence-based programmes such as FAST (mentioned in the recommendation 'Develop a parenting "booster" class'), which is centred on a school and encourages parents to build local support networks and develop effective parenting styles.

12 Conclusion

This report set out to map the pressures and influences on parents in contemporary British society, with the aim of providing insight for how to better support British parents. Essential to this task was addressing confused popular perceptions of a decline in the quality of parenting and politically driven narratives attributing blame to certain types of families. Consequently, this report has been underpinned by the lived experiences of families themselves, and the perspectives of parents and children have been in the forefront throughout. The result is a complex, but realistic, snapshot of life on the home front.

What can be gleaned about family life externally – family structure, household income, educational qualifications and so on – does not always align with the reality of day-to-day family life. For example, the quality of relationships between partners and parents and children unlocks a far more accurate picture of the health of family life than marital status. The quality of parents' social networks and the extent to which adults in a community trust each other is far more revealing about the health of a neighbourhood than about the quality of local services, or even the instances of anti-social behaviour in a local area. The level of chaos, noise and lack of routine in a family home can be a bigger clue to a parent's stress level than the income quintile their household falls in.

Of course, there are close relationships between these factors, and often they serve as good frameworks of disadvantage for policy makers and service providers. Poverty, crime and broken relationships have an undeniable impact on parental confidence and effectiveness. We must therefore tackle problems such as in-work poverty and relationship breakdown because they frequently lead to poor parental well-being and poor child outcomes. Investing in initiatives and policies that support

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shared parenting and healthy relationships is also key here: an equal system of parental leave, preventative relationship support, an early years infrastructure open to all, and a better way of engaging fathers in parenting services are all universal measures that can help.

In other cases, developing a more sophisticated approach to targeting support is key, particularly in a time of fiscal restraint and major public service cuts. This report calls for government and local authorities to improve the way they identify struggling parents in need of support. Where we can swap a blunt tool for a sharp one, we should. That is why this report calls for a range of measures to be introduced, like improved diagnostic tools for assessing children's temperament and behavioural problems, as well as parental style. At the same time there should be improved recruitment and retention of health visitors, and they should be given a broader role so they can take the necessary time to build trusting relationships with parents, identify problems and liaise between families and other support services.

The political will to support parents is firmly in place in the UK and we have achieved cross party consensus on issues such as the importance of parenting in the early years to give a child greater life chances. We have made progress with an early years infrastructure and the growth of a parenting practitioner workforce to deliver support and advice. But we have not gone far enough. As parenting skills and capabilities are transmitted from generation to generation investing in the early years is an investment not just in children's development but in the next generation of parents. Policy decisions must be made by taking the long view, even if it is not politically expedient. Effective and efficient support for parents will come in part from government, but also from communities themselves. The aspiration of a 'Big Society' can be well realised in the case of parenting support where the impact of collective efficacy and social networks on parenting is well understood. To support parents better requires sustained, creative investment and requires working through all available avenues, the most important of which are the social networks and communities of parents themselves.

Appendices

Appendix A Ethnographic methodology Focus groups

We held three focus groups³⁶⁵ with parents and three with children aged between 4 and 11 years old.³⁶⁶ These focus groups served three key purposes. First, they directly informed the research by generating a breadth of data about parenting from a wide range of family contexts (eg contrasting socio-economic indicators, ethnic backgrounds, parental education and employment). Second, they provided opportunities for researchers to begin building connections and rapport with parents and children and generate interest in case study work. Third, they served as a recruitment tool as the eight families participating in ethnographic case studies were chosen from among the focus group participants.

Each focus group with adults lasted approximately 90 minutes, and the focus groups with children lasted for 60 minutes. The sessions with parents focused on the following key topics: learning to be a parent and influences on parenting; and experiences of being a parent, investigating the key challenges faced, confidence in parenting abilities, and feelings associated with being a parent.

Sessions with children were necessarily fluid to accommodate their varying attention spans, interests and abilities; we used participatory and visual methods to engage them in the discussion. The sessions with children focused on the following key topics: their perceptions about parents, their relationships with parents and other family members, their thoughts about what it is like to be a parent, and their emotions in response to different parenting approaches.

We placed strong emphasis on observation during focus groups, with Demos researchers acting as observers and

note-takers. We audio recorded meetings with focus groups and Demos interns transcribed them later.

Family case studies

We conducted eight family case studies. They took place over the course of two day visits to families during which researchers took an ethnographic approach to capture local understandings of parenting in the context of environments where parents and children regularly interact (eg the home and neighbourhood). We spaced visits to families over a period of a month with the two day visits to each family being generally separated by a period of at least a week. This provided opportunities for reflection and data analysis between case study visits and enabled iterative learning about and between family visits.

During the case studies, we paid attention to both parents' and children's perspectives, behaviour and interactions with each other and others. We were particularly interested in exploring:

- parenting styles and approaches, especially how children respond to them and the way in which they interact with their parents in different situations and in response to particular approaches
- the perceived importance parents attached to the development of 'character capabilities' (eg application, self-regulation and empathy) through their parenting approach and the extent to which children display these character capabilities in response to parental involvement

We developed a matrix in order to guide and capture information generated through the case studies. The matrix captured central issues to be explored and offered a selection of potential lines of enquiry, which we developed both in response to the research questions and from a preliminary analysis of focus group material.

We encouraged children to keep photo diaries during the case study period and photos were used as visual stimuli during the family workshop.³⁶⁷ The process of conducting the case study

work was necessarily untidy and often unpredictable, but very productive. In order to document rich observations and interactions, we made field notes, taking rough notes at opportune moments during visits, which we subsequently wrote up on the computer. This was a helpful way of processing intricate and complex experiences and feelings about fieldwork encounters, as well as recording events and interactions of significance in terms of family members' activities and behaviour.

Participatory family workshop

We held a participatory workshop with all eight families once we had completed all case study visits. The workshop took place over the course of a morning at a local primary school and ended with a picnic lunch for families in a local park. We did this to thank families for their involvement in the research and provide an opportunity to observe family interactions in an informal setting. The workshop enabled us to collect further data and allowed participants to engage actively with the analysis process. There were three key goals for the workshop:

- to explore issues which were observed or discussed during the ethnographic case study work by holding some facilitated discussions; specifically, these included issues around parenting approaches, pressures on parents and support networks
- to check back on findings with participants, giving us a chance to see what they thought about initial findings and to fill in gaps by gathering additional information
- to explore the role informal support networks can play in parenting by observing how these contrasting families – both parents and children – interacted together, and listening to the type of topics they discussed

We used a participatory research approach during the workshop, involving visual methods and interactive research activities. Sessions were necessarily fluid and encompassed activities and discussions with parents and children together and separately. The workshop began by engaging participants in a

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family exercise, which provided opportunities to observe interactions between family members and build rapport between families. We asked families to draw and present a picture of their family doing something they usually did together, and we asked children to select their favourite photographs and tell the group about them.

We carried out subsequent sessions with parents and children separately. Sessions with parents included discussions groups about parenting styles and approaches (where parents were asked to place themselves on the axes of parenting outlined in chapter 1), and explored parents' knowledge, attitudes and opinions about support and services.

Sessions with children included an exercise about parenting styles and approaches, where they were asked to place their parents on the axes of parenting, and then consider where they would like their parents to be on the axes; and the development of a role play about the local area (where the subject was being in a local park at night time). The sessions with children were particularly difficult to manage owing to the number of children involved who had behavioural problems (eg ADHD) and/or learning difficulties (eg autism). Consequently, during the second session we split children into groups and carried out the main workshop activities with a group of older children.

There was a strong emphasis on observation and notetaking throughout the sessions to capture strong opinions and feelings and gain insights into the different and contrasting ways family members interacted with both other family members and other families. We audio recorded sessions and listened to the recordings in order to fill out notes taken during the various sessions.

Analysis procedures

The methods described in the sections above produced the following data sets: focus group notes and transcripts, field notes for each case study family and notes from workshop sessions. We subjected these data sets to a rigorous grounded thematic analysis process using 'open coding' and 'axial coding'.³⁶⁸

The analysis of a seemingly vast array of qualitative data is not easy, though becomes easier once it is organised and (re)familiar. Thematic analysis using 'open coding' is the search for themes that emerge as important to the description of phenomena. It involves identifying themes and topics that emerge from the data and is a form of pattern recognition whereby the themes identified are meaningful by virtue of being recognisable and holding some degree of importance to the community in which the data were generated. In other words, themes are grounded in the subjective meaning the action, observations and conversation topics had for the actor. Thematic analysis, therefore, aims to 'safeguard' the subjective point of view rather than replace it with meaning construed by the researcher.

Numerous 'theoretical memos'³⁶⁹ are noted down as analytical reminders for generating ideas and making links between different data. 'Axial coding' is the process of linking or organising these 'open codes' into themes and sub themes, and sub-sub themes, and so on, while engaging more deeply with the data collected and the theoretical memos that arise.

Data analysis was an ongoing process to ensure iterative learning throughout the research. Furthermore, the final workshop enabled us to present preliminary findings to participants, and discuss them, to ensure they remained rooted in the subjective meanings that actions and opinions had for participants themselves.

Research logistics

This section outlines the logistics of undertaking this research, focusing on the selection of the research location and case study primary school, as well as the recruitment of research participants.

The research location

We conducted the research in London for a number of reasons. First, it provided a broad and contrasting sample population from which to draw family case studies owing to the sheer diversity of family types, social and ethnic groups and parental backgrounds which are available in close proximity. Second, from a practical point of view it enabled us to maximise opportunities to engage Demos researchers, at short notice, in research activities which were necessarily fluid and flexible such as family visits. Third, we were able to draw on Demos' established contacts with schools and parenting related services. Finally, it enhanced opportunities to involve case study families in further research activities, such as the launch of the final report.

Given that the ethnographic component of our research was aimed at providing an in-depth understanding about parenting, we focused on one London borough, which encompassed contrasting districts. Together, these districts represented an interesting and contrasting socio-economic context for research and ensured a good ethnic mix of family case studies. This was important as we found socio-economic factors (eg income, educational qualifications, employment) to be especially influential in affecting parenting style in a previous piece of research conducted by Demos, *Building Character*.³⁷⁰

Recruiting a local primary school

We opted to use a local primary school, which drew children and families from across the borough. This was done to avoid bias towards struggling and disadvantaged parents, which might have been caused by recruiting families through parenting programmes such as Sure Start or children's centres. Focusing research attention on a particular geographic locality and using the local primary school for recruitment purposes (and research activities including focus groups and the participatory family workshop) facilitated the ethnographic research process in a number of ways:

- by encouraging relationship-building between researchers and participants, and between participants themselves
- by providing a familiar venue for research activities in which parents were comfortable
- · by maximising possibilities to recruit parents and children who

already knew each other, encouraging a familiar and friendly atmosphere for research activities

Recruiting research participants

We sent a letter introducing the research and inviting parents and children to participate to all parents with children at the primary school. We also sent a questionnaire for parents requesting information about the home and family, ethnic group, parental background and an opportunity to indicate availability for focus groups, and a consent form for parents to give consent for children to participate in the research.

Owing to a poor response to invitation letters representatives from the research team and Demos attended a 'parents' day' at the primary school to promote interest in the research more directly with parents. As a result, we identified parents and children to take part in focus groups, and we used these groups to recruit families for the case study and workshop phases of the research. As a result, we recruited eight families for case study work and all except one of these families attended the participatory family workshop.

Appendix B Ethical guidelines for ethnographic study

We carried out the research in accordance with the ethical guidelines produced by the Royal Geographical Society Developing Areas Research Group and the Association of Social Anthropologists. We also drew on guidelines outlined in the Knowing Children Handbooks,³⁷¹ Ruth Payne's work on reinventing ethics,³⁷² and her experience of developing ethical guidelines for child protection research. These include the Indonesian Interagency Guidelines on Conducting Ethical Research with Children and training in ethical approaches to child protection research with United Nations multicultural field teams in Nepal.³⁷³

Although specific ethical precautions need to be taken when undertaking research with different audiences, key principles include informed consent and voluntary participation, no physical or psychological harm to research participants, and

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privacy, anonymity and confidentiality. A number of procedures were in place throughout the research cycle. Before the research we sought informed consent to participate in research activities from parents and children, and had a conversation with school teachers and the parent-teacher liaison to ensure researchers were aware of any particularly sensitive or difficult circumstances of children (and parents) involved in the focus groups and case studies (eg bereavement or divorce in the family, or children with learning difficulties or disabilities).

During the research we continually sought informed consent to engage in the research from parents and children by checking that they were happy to participate in activities. This was especially the case during family visits where researchers were especially sensitive to ensuring family members were comfortable with them being around and participating in family activities. We frequently reminded children that they could pull out of the activities and discussions at any point if they wished, and that if they were struggling they should tell the researcher, their class teacher or a parent. After the research, we shared particular concerns about children and information about circumstances at home with school staff in the interest of transparency and to support the effectiveness of the school's work with the families of children in their care.

Appendix C Demographic breakdown of families in survey

Table 1 Number of mothers and fathers

	Mum	Dad
Percentage	55	45

Iddle 2 DI	eakuown	ortypes	orianine	5				
	Married, I parents	both Sir	ngle parents	s Cohabi both pa		Step family		
Percentage	58	16		13		13		
Table 3 Extent to which parenting was shared by parents								
	Yes		No		Sha	red		
Percentage	71		6		23			
Table 4 Household income of families								
	<£10,400		£20,001- £31,200	£31,201- £41,600		601- >£52,000 000		
Percentage	9	21	22	21	13	14		
Table 5 Region of parents								
					-			
	Enç	gland S	icotland	Wales & N	11			
Percentage	84	1	0	6				
Table 6 Age of parents at time of survey								
	16-24	25-34	4 35-	44 4	5-54	55+		
Percentage	3	29	40	2	1	7		

Table 2 Breakdown of types of families

Table 7 Ethnic origin of families

	White	Black/Black British	Mixed	Asian/Asian British	Chinese
Percentage	89	3	2	5	1

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Parenting is increasingly important in public policy. A growing evidence base confirms our intuitions: parents play a key role in shaping children's life chances. But socioeconomic and environmental circumstances can shape and influence parents' approaches for better and worse. Understanding these circumstances is key to supporting parents better.

The Home Front debunks popular perceptions of a decline in parenting ability that attribute blame to certain types of families. It shows that what can be learned about family life externally – family structure, household income, educational qualifications and so on – does not always align with the reality of day-to-day family life. Policymakers must use the evidence and resources available to identify the families most in need of support.

In this pamphlet, researchers go behind closed doors to observe the lived experiences of families today. Through indepth, ethnographic case studies of families, nationally representative polling and policy review and analysis, we develop policies to ease the pressures on parents. *The Home Front* recommends building the parenting skills base, targeting support according to need, applying the early intervention principle beyond the early years and supporting shared parenting, social networks and communities. Parents shoulder a great deal of responsibility for the life chances of the next generation. Better support for parents means sharing out that responsibility.

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